

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)

2002

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ 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 period beginning **JUL 1, 2002** and ending **JUN 30, 2003**

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 THE INSTITUTE FOR FOREIGN POLICY ANALYSIS, INC. Number and street (or P O box if mail is not delivered to street address) Room/suite 675 MASSACHUSETTS AVENUE City or town, state or country, and ZIP + 4 CAMBRIDGE, MA 02139	D Employer identification number 51-0192436 E Telephone number 617-492-2116 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

G Web site: ▶ **WWW.IFPA.ORG**

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.

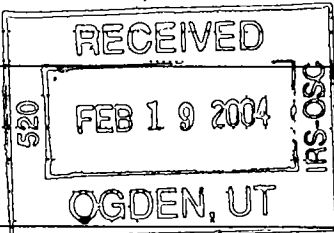
L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **3,159,357.**

I Enter 4-digit GEN ▶

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	1,451,638.	
	b	Indirect public support	1b		
	c	Government contributions (grants)	1c		
	d	Total (add lines 1a through 1c) (cash \$ 1,451,638. noncash \$)	1d	1,451,638.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	1,699,630.	
	3	Membership dues and assessments	3		
	4	Interest on savings and temporary cash investments	4	8,089.	
	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			
Revenue	8 a	Gross amount from sale of assets other than inventory	(A) Securities	(B) Other	
		Less cost or other basis and sales expenses	8a		
		Gain or (loss) (attach schedule)	8b		
		Net gain or (loss) (combine line 8c, columns (A) and (B))	8c		
8d					
Revenue	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		
9c	Net income or (loss) from special events (subtract line 9b from line 9a)				
Revenue	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					
Expenses	11	Other revenue (from Part VII, line 103)	11		
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	3,159,357.	
	13	Program services (from line 44, column (B))	13	1,982,232.	
	14	Management and general (from line 44, column (C))	14	758,255.	
	15	Fundraising (from line 44, column (D))	15	76,388.	
	16	Payments to affiliates (attach schedule)	16		
	17	Total expenses (add lines 16 and 44, column (A))	17	2,816,875.	
	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	342,482.	
	Net Assets	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	362,912.
		20	Other changes in net assets or fund balances (attach explanation)	20	<14,270.>
		21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	691,124.



SEE STATEMENT 1

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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	539,988.	333,712.	185,756.	20,520.	
26	Other salaries and wages	746,310.	461,220.	256,731.	28,359.	
27	Pension plan contributions	95,144.	58,800.	32,775.	3,569.	
28	Other employee benefits	86,180.	53,260.	29,687.	3,233.	
29	Payroll taxes	81,625.	50,445.	28,118.	3,062.	
30	Professional fundraising fees					
31	Accounting fees	13,250.		13,250.		
32	Legal fees					
33	Supplies	39,703.		39,703.		
34	Telephone	54,641.		54,641.		
35	Postage and shipping	11,355.		11,355.		
36	Occupancy	241,168.		241,168.		
37	Equipment rental and maintenance	17,508.		17,508.		
38	Printing and publications	62,513.	59,782.	2,731.		
39	Travel	245,238.	171,482.	73,756.		
40	Conferences, conventions, and meetings	192,456.	190,820.	1,636.		
41	Interest	229.		229.		
42	Depreciation, depletion, etc (attach schedule)	29,844.		29,844.		
43	Other expenses not covered above (itemize)					
a	_____	43a				
b	_____	43b				
c	_____	43c				
d	_____	43d				
e	SEE STATEMENT 2	43e	359,723.	602,711.	<260,633.>	17,645.
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	2,816,875.	1,982,232.	758,255.	76,388.

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?

GOVERNMENT POLICY RESEARCH

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	EXAMINATION OF US FOREIGN POLICY & FORMULATION OF POLICY OPTIONS FOR SUBMISSION TO US GOV'T AGENCIES AND DISSEMINATION TO GENERAL PUBLIC	(Grants and allocations \$ _____)	1,913,883.
b	TRAINING OF FOREIGN POLICY ANALYSTS	(Grants and allocations \$ _____)	68,349.
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)		1,982,232.

Part IV Balance Sheets

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

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing	800.	601.
	46 Savings and temporary cash investments	196,172.	512,952.
	47 a Accounts receivable	160,641.	
	b Less allowance for doubtful accounts		160,641.
	48 a Pledges receivable		
	b Less allowance for doubtful accounts		
	49 Grants receivable	141,756.	80,000.
	50 Receivables from officers, directors, trustees, and key employees		
	51 a Other notes and loans receivable		
	b Less allowance for doubtful accounts		
	52 Inventories for sale or use		
	53 Prepaid expenses and deferred charges		
	54 Investments - securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		
	55 a Investments - land, buildings, and equipment, basis		
	b Less accumulated depreciation		
56 Investments - other			
57 a Land, buildings, and equipment basis	423,717.		
b Less accumulated depreciation	351,166.	72,551.	
58 Other assets (describe <input type="checkbox"/> SEE STATEMENT 3)	54,470.	24,833.	
59 Total assets (add lines 45 through 58) (must equal line 74)		959,137.	851,578.
Liabilities	60 Accounts payable and accrued expenses	195,668.	64,954.
	61 Grants payable	180,499.	95,500.
	62 Deferred revenue		
	63 Loans from officers, directors, trustees, and key employees		
	64 a Tax-exempt bond liabilities		
	b Mortgages and other notes payable		
	65 Other liabilities (describe <input type="checkbox"/>)	220,058.	
66 Total liabilities (add lines 60 through 65)		596,225.	160,454.
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	<360,558.>	<167,935.>
	68 Temporarily restricted	723,470.	859,059.
	69 Permanently restricted		
	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		
	71 Paid-in or capital surplus, or land, building, and equipment fund		
	72 Retained earnings, endowment, accumulated income, or other funds		
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)	362,912.	691,124.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	959,137.	851,578.	

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.

THE INSTITUTE FOR FOREIGN POLICY
ANALYSIS, INC.

Form 990 (2002)

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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	3,159,357.
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	0.
c	Line a minus line b	c	3,159,357.
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	0.
e	Total revenue per line 12, Form 990 (line c plus line d)	e	3,159,357.

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

a	Total expenses and losses per audited financial statements	a	2,816,875.
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	0.
c	Line a minus line b	c	2,816,875.
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	0.
e	Total expenses per line 17, Form 990 (line c plus line d)	e	2,816,875.

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
ROBERT PFALTZGRAFF, JR ----- STRAFFORD, PA	PRESIDENT 40	178,521.	17,471.	0.
JACQUELYN K. DAVIS ----- BETHESDA, MD	EXECUTIVE VP 40	180,763.	17,471.	0.
CHARLES PERRY ----- BROOKLINE, MA	CLERK 40	180,704.	17,471.	0.
JOHN R. GALVIN ----- MEDFORD, MA	DIRECTOR 0.	0.	0.	0.
WILLIAM S. EDGERLY ----- CAMBRIDGE, MA	DIRECTOR 0.	0.	0.	0.
WILLIAM SMITH ----- ALEXANDRIA, VA	DIRECTOR 0.	0.	0.	0.
FRANK CARLUCCI ----- MCLEAN, VA	DIRECTOR 0.	0.	0.	0.
STEPHEN W. RITTERBUSH ----- MCLEAN, VA	DIRECTOR 0.	0.	0.	0.
NEIL B. RUSSELL ----- IRVINE, CA	DIRECTOR 0.	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)

THE INSTITUTE FOR FOREIGN POLICY
ANALYSIS, INC.

Form 990 (2002)

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Part VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization SEE STATEMENT 4 and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81 a	Enter direct or indirect political expenditures See line 81 instructions 81a 0.		
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) 82b N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A	83b	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b	
	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		
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g	
h	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? N/A	85h	
86	501(c)(7) organizations. Enter a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) organizations Enter a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, 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
89 a	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.		
b	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	89b	X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.		
d	Enter Amount of tax on line 89c, above, reimbursed by the organization 0.		
90 a	List the states with which a copy of this return is filed MASSACHUSETTS		
b	Number of employees employed in the pay period that includes March 12, 2002 90b 19		
91	The books are in care of DOROTHY WHALEN Telephone no 617-492-2116		
	Located at 675 MASSACHUSETTS AVENUE, CAMBRIDGE, MA ZIP + 4 02139		
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)

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) Exclu- sion code	(D) Amount	
93 Program service revenue					
a GRANTS & CONTRACTS					336,650.
b CONFERENCES					69,550.
c REPORTS					441.
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					1,292,989.
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	8,089.	
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.		8,089.	1,699,630.
105 Total (add line 104, columns (B), (D), and (E))					1,707,719.

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)
93A	EXAMINE FOREIGN POLICY, TRAIN POLICY ANALYSTS & FORMULATE OPTIONS
93G	EXAMINE FOREIGN POLICY, TRAIN POLICY ANALYSTS & FORMULATE OPTIONS
93B	DISSEMINATE RESULTS OF EXAMINATION OF FOREIGN POLICY ISSUES
93C	DISSEMINATE RESULTS OF EXAMINATION OF FOREIGN POLICY ISSUES

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
NATIONAL SECURITY	%			
PLANNING ASSOCIATES, INC, CAMBRIDGE, MA	%			
04-2993284	100%	RESEARCH / INACTIVE	<14,270.>	0.

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: 12/16/04 Type or print name and title: PRESIDENT

Paid Preparer's Use Only

Preparer's signature: *[Signature]* Date: 2/6/04 Check if self-employed: Preparer's SSN or PTIN: 800045276

Firm's name (or yours if self-employed), address, and ZIP + 4: COLES & BODOIN, LLP, 75 SECOND AVENUE, NEEDHAM, MA 02494

EIN: Phone no: 781-455-1400

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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-EZ

OMB No 1545-0047

2002

Name of the organization **THE INSTITUTE FOR FOREIGN POLICY ANALYSIS, INC.** Employer identification number **51 0192436**

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
ANDREW C. WINNER ----- BARRINGTON, RI	SR STAFF 40	104,455.	10,445.	
MICHAEL SWEENEY ----- ARLINGTON, VA	SR STAFF 40	80,833.	8,083.	
DOROTHY M. WHALEN ----- CAMBRIDGE, MA	CFO 40	72,917.	3,750.	
----- ----- -----				
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
ROGER W. ROBINSON, INC ----- WASHINGTON, DC	RESEARCH CONSULTANT	155,000.
TIMOTHY CAMPBELL ----- ALEXANDRIA, VA	RESEARCH CONSULTANT	98,000.
----- ----- -----		
Total number of others receiving over \$50,000 for professional services ▶	0	

Part III Statements About Activities (See page 2 of the 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) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities	1	X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any 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 pages 3 through 5 of the instructions)
The organization is not a private foundation because it is: (Please check only ONE applicable box)
5 <input type="checkbox"/> A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
6 <input type="checkbox"/> A school Section 170(b)(1)(A)(ii) (Also complete Part V)
7 <input type="checkbox"/> A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
8 <input type="checkbox"/> A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
9 <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input checked="" type="checkbox"/> 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 <input type="checkbox"/> A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
12 <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input type="checkbox"/> An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

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)		

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	

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	

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 -		
If the amount on line 40 is -		
Not over \$500,000		
Over \$500,000 but not over \$1,000,000		
Over \$1,000,000 but not over \$1,500,000		
Over \$1,500,000 but not over \$17,000,000		
Over \$17,000,000		
The lobbying nontaxable amount is -		
20% of the amount on line 40		
\$100,000 plus 15% of the excess over \$500,000		
\$175,000 plus 10% of the excess over \$1,000,000		
\$225,000 plus 5% of the excess over \$1,500,000		
\$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 (e) Total
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	
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)

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

- 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.)

Yes	No	Amount
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
	X	
		0.

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

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	STATEMENT	1
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DESCRIPTION	AMOUNT
LOSS OF UNCONSOLIDATED WHOLLY-OWNED SUBSIDIARY	<14,270.>
TOTAL TO FORM 990, PART I, LINE 20	<14,270.>

FORM 990	OTHER EXPENSES	STATEMENT	2
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DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
PROMOTION	13,859.	922.	12,937.	
OTHER PROF SERVICES	255,972.	255,972.		
LIBRARY & RESEARCH				
MATERIALS	23,728.	23,728.		
MISCELLANEOUS	17,570.		17,570.	
GSA FUNDING FEE	11,594.	11,594.		
FELLOWSHIPS	37,000.	37,000.		
ALLOCATION OF OVERHEAD	0.	273,495.	<291,140.>	17,645.
TOTAL TO FM 990, LN 43	359,723.	602,711.	<260,633.>	17,645.

FORM 990	OTHER ASSETS	STATEMENT	3
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DESCRIPTION	AMOUNT
DEPOSITS	6,782.
MISC RECEIVABLES	816.
PREPAID EXPENSES	17,235.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	24,833.

FORM 990

IDENTIFICATION OF RELATED ORGANIZATIONS
PART VI, LINE 80B

STATEMENT 4

NAME OF ORGANIZATION

EXEMPT

NONEXEMPT

NATIONAL SECURITY PLANNING ASSOCIATES, INC

X

Depreciation and Amortization

(Including Information on Listed Property)

(Rev. March 2002)

Department of the Treasury
Internal Revenue Service (99)

See separate instructions Attach to your tax return

Attachment Seq No
67

Name(s) shown on return Institute For Foreign Policy Analysis, Inc	Business or activity to which this form relates Non Profit Research Organization	Identifying number 51-0192436
-----------------------------------------------------------------------	-------------------------------------------------------------------------------------	----------------------------------

Part I Election To Expense Certain Tangible Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I

1 Maximum amount. See page 2 of the instructions for a higher limit for certain businesses	1	24,000
2 Total cost of section 179 property placed in service (see page 2 of the instructions).	2	0
3 Threshold cost of section 179 property before reduction in limitation	3	200,000
4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	0
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see page 2 of the instructions	5	24,000
6		
(a) Description of property	(b) Cost (business use only)	(c) Elected cost
		0
		0
7 Listed property. Enter the amount from line 29		
		0
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7		
		0
9 Tentative deduction. Enter the smaller of line 5 or line 8		
		0
10 Carryover of disallowed deduction from line 13 of your 2001 Form 4562.		
		0
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)		
		0
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11		
		0
13 Carryover of disallowed deduction to 2003. Add lines 9 and 10, less line 12		
		0

Note: Do not use Part II or Part III below for listed property. Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see page 3 of the instructions)	14	0
15 Property subject to section 168(f)(1) election (see page 4 of the instructions)	15	
16 Other depreciation (including ACRS) (see page 4 of the instructions)	16	24,812

Part III MACRS Depreciation (Do not include listed property.) (See page 4 of the instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2002	17	0
18 If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		0

Section B - Assets Placed in Service During 2002 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation <small>(business/investment)</small>	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property						0
b 5-year property		32,846	5	Schedule	s/l	5,032
c 7-year property						0
d 10-year property						0
e 15-year property						0
f 20-year property						0
g 25-year property			25 yrs		S/L	0
h Residential rental property			27.5 yrs	MM	S/L	0
i Nonresidential real property			27.5 yrs.	MM	S/L	0
			39 yrs	MM	S/L	0

Section C - Assets Placed in Service During 2002 Tax Year Using the Alternative Depreciation System

20 a Class life					S/L	0
b 12-year			12 yrs.		S/L	0
c 40-year			40 yrs	MM	S/L	0

Part IV Summary (see page 6 of the instructions)

21 Listed property. Enter amount from line 28	21	0
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	29,844
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	0

THE INSTITUTE FOR FOREIGN POLICY ANALYSIS, INC.

51-0192436

FORM 990 – SCHEDULE A

JUNE 30, 2003

**STATEMENT OF FACTS AND CIRCUMSTANCES
RE: PUBLIC SUPPORT**

1. The Organization's percentage of public support for the last two years 2002 and 2001 was 29.28% and 31.47%, respectively, which is greater than the 10% minimum requirement.
2. The Organization's governing body represents the broad interest of the general public.
3. The Organization performs research which serves the interests of the general public in furtherance of its exempt purpose.
4. The Organization maintains a continuous program for solicitation of funds from the general public.

THE INSTITUTE FOR FOREIGN POLICY ANALYSIS, INC.

FORM 990

51-0192436

JUNE 30, 2003

SCHEDULE A - PART III - QUESTION 2(B)

The following activity took place with National Security Planning Associates, Inc., which is a wholly owned non-exempt corporation. All of the officers of the Institute are also officers or directors of the subsidiary

Net advances to subsidiary	\$ 21,858
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SCHEDULE A - PART III - QUESTION 4

The Institute for Foreign Policy Analysis, Inc. is a non-profit research organization which has a three-fold purpose:

- 1 Examination of issues of U.S. foreign policy
- 2 Formulation of policy options and programs for submission to U.S. government agencies and dissemination to the public
- 3 Training of students for policy analysis careers

The Institute awards fellowships and research appointments to a select number of pre-doctoral candidates and recent recipients of the PhD degree in keeping with its commitment to the training of policy analysts.

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ 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 THE INSTITUTE FOR FOREIGN POLICY ANALYSIS, INC.	Employer identification number 51-0192436
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. 675 MASSACHUSETTS AVENUE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. CAMBRIDGE, MA 02139	

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 FEBRUARY 17, 2004 to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year ____ or
 ▶ tax year beginning JUL 1, 2002, and ending JUN 30, 2003

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 ▶ *James Dolan* Title ▶ _____ Date ▶ 11/10/03
 LHA For Paperwork Reduction Act Notice, see instruction Form 8868 (12-2000)