Form **990**

Department of the Treasury
Internal Revenue Service

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

2005

Open to Public Inspection

A For the 2005 calendar year, or tax year beginning , 2005, and ending ,

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Final return ☐ Amended return ☐ Application pending

Please use IRS label or print or type. See specific instructions.

NATIONAL CENTER FOR PUBLIC POLICY RESEARCH
501 CAPITOL COURT, N.E. #200
WASHINGTON, DC 20002

D Employer Identification Number: 52-1226614

E Telephone number: 202-543-4110

F Accounting method: ☐ Cash ☒ Accrual ☐ Other (specify) ►

● **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? ☐ Yes ☐ No (If 'No,' attach a list See instructions)

H (d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

G Web site: ► WWW.NATIONALCENTER.ORG

J Organization type (check only one) ► ☒ 501(c) 3 ◄ (insert no) ☐ 4947(a)(1) or ☐ 527

I Group Exemption Number ►

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 chooses to file a return, be sure to file a complete return **Some states require a complete return.**

M Check ► ☒ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ► 7,453,931.

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

REVENUE	1	Contributions, gifts, grants, and similar amounts received				
	a	Direct public support	1a	7,420,844.		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c			
	d	Total (add lines 1a through 1c) (cash $ 7,420,844. noncash $)			1d	7,420,844.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	
	3	Membership dues and assessments			3	
	4	Interest on savings and temporary cash investments			4	1,035.
	5	Dividends and interest from securities			5	
	6a	Gross rents	6a	32,052.		
	b	Less rental expenses	6b	46,488.		
	c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	-14,436.
	7	Other investment income (describe)			7	

		(A) Securities		(B) Other		
8a	Gross amount from sales of assets other than inventory		8a			
b	Less: cost or other basis and sales expenses		8b			
c	Gain or (loss) (attach schedule)		8c			
d	Net gain or (loss) (combine line 8c, columns (A) and (B))				8d	

	9	Special events and activities (attach schedule) If any amount is from **gaming**, check here ► ☐				
	a	Gross revenue (not including $ of contributions reported on line 1a)	9a			
	b	Less direct expenses other than fundraising expenses	9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	
	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
	11	Other revenue (from Part VII, line 103)			11	
	12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	7,407,443.
EXPENSES	13	Program services (from line 44, column (B))			13	5,153,767.
	14	Management and general (from line 44, column (C))			14	395,287.
	15	Fundraising (from line 44, column (D))			15	1,933,812.
	16	Payments to affiliates (attach schedule)			16	
	17	**Total expenses** (add lines 16 and 44, column (A))			17	7,482,866.
NET ASSETS	18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	-75,423.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	458,378.
	20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 1			20	2,679.
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	385,634.

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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 (att sch) (cash $ ______ non-cash $ ______) If this amount includes foreign grants, check here ► ☐	22				
23 Specific assistance to individuals (att sch)	23				
24 Benefits paid to or for members (att sch)	24				
25 Compensation of officers, directors, etc	25	270,067.	210,724.	13,504.	45,839.
26 Other salaries and wages	26	219,535.	167,713.	48,503.	3,319.
27 Pension plan contributions	27				
28 Other employee benefits	28				
29 Payroll taxes	29	34,939.	27,006.	4,425.	3,508.
30 Professional fundraising fees	30				
31 Accounting fees	31	20,375.		20,375.	
32 Legal fees	32	250,238.		242,539.	7,699.
33 Supplies	33	15,517.	11,994.	1,965.	1,558.
34 Telephone	34	8,505.	6,574.	1,077.	854.
35 Postage and shipping	35	10,441.	8,637.	1,415.	389.
36 Occupancy	36				
37 Equipment rental and maintenance	37	223.	173.	28.	22.
38 Printing and publications	38	33,687.	28,944.	4,743.	
39 Travel	39	2,568.	1,985.	325.	258.
40 Conferences, conventions, and meetings	40	2,991.	2,312.	379.	300.
41 Interest	41	55,112.	42,599.	6,980.	5,533.
42 Depreciation, depletion, etc (attach schedule)	42	29,841.	23,066.	3,779.	2,996.
43 Other expenses not covered above (itemize). a SEE STATEMENT 2	43a	6,528,827.	4,622,040.	45,250.	1,861,537.
b	43b				
c	43c				
d	43d				
e	43e				
f	43f				
g	43g				
44 Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	7,482,866.	5,153,767.	395,287.	1,933,812.

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 $ 6,313,041. ; **(ii)** the amount allocated to Program services $ 4,498,287. , **(iii)** the amount allocated to Management and general $ ______ , and **(iv)** the amount allocated to Fundraising $ 1,814,754.

Part III Statement of Program Service Accomplishments

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

What is the organization's primary exempt purpose? ► PUBLIC POLICY RESEARCH AND EDUCATION. 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) organizations and 4947(a)(1) trusts, but optional for others)
a SEE STATEMENT 3 (Grants and allocations $) If this amount includes foreign grants, check here ► ☐	5,153,767.
b (Grants and allocations $) If this amount includes foreign grants, check here ► ☐	
c (Grants and allocations $) If this amount includes foreign grants, check here ► ☐	
d (Grants and allocations $) If this amount includes foreign grants, check here ► ☐	
e Other program services (Grants and allocations $) If this amount includes foreign grants, check here ► ☐	
f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) ►	5,153,767.

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			1,174,073.	45	287,155.
46 Savings and temporary cash investments				46	103,920.
47a Accounts receivable	47a	2,045.			
b Less: allowance for doubtful accounts	47b		2,088.	47c	2,045.
48a Pledges receivable	48a	55,000.			
b Less allowance for doubtful accounts	48b		30,000.	48c	55,000.
49 Grants receivable				49	
50 Receivables from officers, directors, trustees, and key employees (attach schedule)			80.	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			26,543.	53	6,447.
54 Investments – securities (attach schedule) ► ☐ Cost ☐ FMV				54	
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	57a	1,412,693.			
b Less: accumulated depreciation (attach schedule) STATEMENT 4	57b	77,364.	1,295,243.	57c	1,335,329.
58 Other assets (describe ► SEE STATEMENT 5)			20,046.	58	19,616.
59 **Total assets** (must equal line 74) Add lines 45 through 58			2,548,073.	59	1,809,512.
LIABILITIES					
60 Accounts payable and accrued expenses			960,350.	60	312,602.
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)			1,129,345.	64b	1,111,276.
65 Other liabilities (describe ►)				65	
66 **Total liabilities.** Add lines 60 through 65			2,089,695.	66	1,423,878.
NET ASSETS OR FUND BALANCES					
Organizations that follow SFAS 117, check here ► ☒ and complete lines 67 through 69 and lines 73 and 74					
67 Unrestricted			458,378.	67	385,634.
68 Temporarily restricted				68	
69 Permanently restricted				69	
Organizations that do not follow SFAS 117, check here ► ☐ 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)			458,378.	73	385,634.
74 **Total liabilities and net assets/fund balances.** Add lines 66 and 73			2,548,073.	74	1,809,512.

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

a	Total revenue, gains, and other support per audited financial statements			a	N/A
b	Amounts included on line a but not on Part I, line 12				
	1 Net unrealized gains on investments	b1			
	2 Donated services and use of facilities	b2			
	3 Recoveries of prior year grants	b3			
	4 Other (specify)	b4			
	Add lines b1 through b4			b	
c	Subtract line b from line a			c	
d	Amounts included on Part I, line 12, but not on line a:				
	1 Investment expenses not included on Part I, line 6b	d1			
	2 Other (specify)	d2			
	Add lines d1 and d2			d	
e	**Total revenue** (Part I, line 12) Add lines c and 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 Part I, line 17				
	1 Donated services and use of facilities	b1			
	2 Prior year adjustments reported on Part I, line 20	b2			
	3 Losses reported on Part I, line 20	b3			
	4 Other (specify)	b4			
	Add lines b1 through b4			b	
c	Subtract line b from line a			c	
d	Amounts included on Part I, line 17, but not on line a:				
	1 Investment expenses not included on Part I, line 6b	d1			
	2 Other (specify).	d2			
	Add lines d1 and d2			d	
e	**Total expenses** (Part I, line 17) Add lines c and d ►			e	

Part V-A Current Officers, Directors, Trustees, and Key Employees

(List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated) *(See the 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 plans	(E) Expense account and other allowances
AMY RIDENOUR 501 CAPITOL CT. N.E. SUITE 200 WASHINGTON, DC 20002	PRESIDENT 0	159,456.	0.	0.
DAVID RIDENOUR 501 CAPITOL CT, NE. SUITE 200 WASHINGTON, DC 20002	VICE PRESIDENT 0	110,610.	0.	0.
EDMUND F. HAISLMAIER THE HERITAGE FOUNDATION WASHINGTON, DC	DIRECTOR 0	0.	0.	0.
VICTOR PORLIER CENTER FOR CIVIC RENEWAL NEW YORK, NY	DIRECTOR 0	0.	0.	0.
JAY W. TIMMONS NATIONAL ASSOC. OF MANUFACTURE WASHINGTON, DC	DIRECTOR 0	0.	0.	0.
HORACE COOPER GEORGE MASON UNIVERSITY ARLINGTON, VA	DIRECTOR 0	0.	0.	0.

Part V-A Current Officers, Directors, Trustees, and Key Employees *(continued)*

		Yes	No
75a Enter the total number of officers, directors, and trustees permitted to vote on organization business as board meetings ► 6			
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If 'Yes,' attach a statement that identifies the individuals and explains the relationship(s)	75b		X
c Do any officers, directors, trustees, or key employees listed in form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control?	75c		X
Note. Related organizations include section 509(a)(3) supporting organizations			
If 'Yes,' attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization			
d Does the organization have a written conflict of interest policy?	75d	X	

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits

(If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column See the instructions)

(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances

Part VI Other Information *(See the 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	76		X
77 Were any changes made in the organizing or governing documents but not reported to the IRS?	77	X	
If 'Yes,' attach a conformed copy of the changes			
78a 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?	78b	N/A	
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement	79		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?	80a		X
b If 'Yes,' enter the name of the organization ► N/A and check whether it is ☐ exempt or ☐ nonexempt			
81a Enter direct and indirect political expenditures (See line 81 instructions) 81a 0.			
b Did the organization file **Form 1120-POL** for this year?	81b		X

Part VI Other Information *(continued)*

			Yes	No
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?		83b	X	
84 a Did the organization solicit any contributions or gifts that were not tax deductible?		84a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		84b	N/A	
85 *501(c)(4), (5), or (6) organizations* **a** Were substantially all dues nondeductible by members?		85a	N/A	
b Did the organization make only in-house lobbying expenditures of $2,000 or less?		85b	N/A	
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?		85g	N/A	
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?		85h	N/A	
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 STATEMENT 6 ►				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 ► AK AL AR AZ CA CO CT DC FL GA IL IN KY MA MD ME M

b Number of employees employed in the pay period that includes March 12, 2005 (See instructions) 90b 0

91 a The books are in care of ► AMY RIDENOUR Telephone number ► 202-543-4110

Located at ► 501 CAPITOL COURT, NE SUITE 200 WASH DC, ZIP + 4 ► 20002

		Yes	No
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b		X
If 'Yes,' enter the name of the foreign country ►			
See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Statements			
c At any time during the calendar year, did the organization maintain an office outside of the United States?	91c		X
If 'Yes,' enter the name of the foreign country ►			

92 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* ***Form 1041*** – Check here N/A ► ☐

and enter the amount of tax-exempt interest received or accrued during the tax year ► 92 N/A

Form **990** (2005) NATIONAL CENTER FOR PUBLIC POLICY 52-1226614 Page **8**

Part VII **Analysis of Income-Producing Activities** *(See 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) Exclusion code	(D) Amount	
93 Program service revenue					
a					
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	1,035.	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property	531120	-14,436.			
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))		-14,436.		1,035.	

105 Total (add line 104, columns (B), (D), and (E)) ► -13,401.

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 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)
N/A	

Part IX **Information Regarding Taxable Subsidiaries and Disregarded Entities** *(See 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 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 [redacted]

Note: *If 'Yes' to **(b)**, file Form 8870 **and** Form 4720 (see instruction*[redacted]

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including [redacted]
true, correct, and complete Declaration of preparer (other than officer) is base[redacted]

► Amy Ridenour [redacted]
Signature of officer

► AMY RIDENOUR, PRES[redacted]
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ► JOHN D. HOLLIS, CPA [redacted]

Firm's name (or yours if self-employed), address, and ZIP + 4 ► POLAN WHITE & ASSOCIATES
1901 RESEARCH BLVD SUITE 30[redacted]
ROCKVILLE, MD 20850

BAA

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 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

2005

Name of the organization: NATIONAL CENTER FOR PUBLIC POLICY RESEARCH

Employer identification number: 52-1226614

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
SEE STATEMENT 7		79,833.	0.	0.
Total number of other employees paid over $50,000 ►	0			

Part II – A 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
DIRECT RESPONSE DATA MANAGEMENT ,	FUNDRAISING FEES	873,763.
RESPONSE DYNAMICS, INC. 2070 CHAIN BRIDGE RD. VIENNA VA 22182 ,	FUNDRAISING FEES	541,448.
WASHINGTON INTELIGENCE BUREAU 4128 PEPSI PLACE CHANTILLY, VA 20151	FUNDRAISING FEES	254,035.
FULFILLMENT MANAGEMENT SERVICE ,	FUNDRAISING FEES	973,658.
Total number of others receiving over $50,000 for professional services ► 0		

Part II – B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms If there are none, enter 'None ' See instructions)

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over $50,000 for other services ► 0		

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 ► $ 0. (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)? SEE FORM 990, PART V	2d	X	
e	Transfer of any part of its income or assets?	2e		X
3a	Do you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how you determine that recipients qualify to receive payments)	3a		X
b	Do you have a section 403(b) annuity plan for your employees?	3b		X
c	During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3c		X
4a	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a		X
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		X

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) Check the box that describes the type of supporting organization ► ☐ Type 1 ☐ Type 2 ☐ Type 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.)

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) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	8,755,532.	4,996,340.	5,663,849.	5,865,973.	25,281,694.
16 Membership fees received					0.
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			9,346.	600.	9,946.
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	119.				119.
19 Net income from unrelated business activities not included in line 18	2,921.				2,921.
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0.
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					0.
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets SEE STMT 8	4,727.	185.	1,419.	4,432.	10,763.
23 Total of lines 15 through 22	8,763,299.	4,996,525.	5,674,614.	5,871,005.	25,305,443.
24 Line 23 minus line 17	8,763,299.	4,996,525.	5,665,268.	5,870,405.	25,295,497.
25 Enter 1% of line 23	87,633.	49,965.	56,746.	58,710.	

26 **Organizations described on lines 10 or 11:** a Enter 2% of amount in column (e), line 24 ► 26a 505,910.

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 2001 through 2004 exceeded the amount shown in line 26a **Do not file this list with your return** Enter the total of all these excess amounts ► 26b

c Total support for section 509(a)(1) test Enter line 24, column (e) ► 26c 25,295,497.

d Add Amounts from column (e) for lines 18 119. 19 2,921. 22 10,763. 26b 26d 13,803.

e Public support (line 26c minus line 26d total) ► 26e 25,281,694.

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ► 26f 99.95 %

27 **Organizations described on line 12:** N/A

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:

(2004) ______ (2003) ______ (2002) ______ (2001) ______

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 11b, 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:

(2004) ______ (2003) ______ (2002) ______ (2001) ______

c Add Amounts from column (e) for lines. 15 ____ 16 ____ 17 ____ 20 ____ 21 ____ 27c

d Add Line 27a total ____ and line 27b total ____ 27d

e Public support (line 27c total minus line 27d total) ► 27e

f Total support for section 509(a)(2) test Enter amount from line 23, column (e) ► 27f

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ► 27g %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ► 27h %

28 **Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, 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

Part V 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?	29		
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?	30		
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?	31		
	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?	32d		
	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?	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?	33h		
	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?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	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	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions)
(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
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	0.	0.
39 Other exempt purpose expenditures	39		1,500.
40 Total exempt purpose expenditures (add lines 38 and 39)	40	0.	1,500.
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		300.
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	0.	75.
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	0.	0.
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	0.	0.
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)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount	300.				300.
46 Lobbying ceiling amount (150% of line 45(e))					450.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount	75.				75.
49 Grassroots ceiling amount (150% of line 48(e))					113.
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 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:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through h.)			

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 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?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:			
(i) Cash	51 a (i)		X
(ii) Other assets	a (ii)		X
b Other transactions			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b (i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b (ii)		X
(iii) Rental of facilities, equipment, or other assets	b (iii)		X
(iv) Reimbursement arrangements	b (iv)		X
(v) Loans or loan guarantees	b (v)		X
(vi) Performance of services or membership or fundraising solicitations	b (vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization 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.

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

52a 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
N/A		

STATEMENT 1
FORM 990, PART I, LINE 20
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

INCREASE IN FMV OF INVESTMENTS	$ 2,679.
TOTAL	$ 2,679.

STATEMENT 2
FORM 990, PART II, LINE 43
OTHER EXPENSES

	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUNDRAISING
BANK SERVICE CHARGE	24,039.		24,039.	
BOOKS & SUBSCRIPTION	3,839.	3,839.		
CLIP SERVICES	9,178.	9,178.		
CONFERENCE SPONSERSHIPS	4,102.	4,102.		
CONSULTING	29,927.	20,424.	8,325.	1,178.
DIRECT MAILING	6,313,041.	4,498,287.		1,814,754.
DUES	6,675.	6,675.		
GIFTS	762.		762.	
GOVERNMENT FILING FEE	3,996.			3,996.
INSURANCE	46,702.	36,098.	5,915.	4,689.
INTERNET	13,297.	10,278.	1,684.	1,335.
MOVING EXPENSE	2,299.	1,776.	291.	232.
OUTSIDE SERVICE	6,255.	4,835.	792.	628.
PARKING	510.	395.	64.	51.
PAYROLL SERVICES	2,968.	2,294.	376.	298.
PHOTO EXPENSE	285.	220.	36.	29.
REPAIR & MAINTENANCE	13,068.	10,101.	1,655.	1,312.
RESEARCH	84.	84.		
SECURITY	639.	494.	81.	64.
STORAGE COSTS	5,449.	5,449.		
T&S	31,995.			31,995.
TAXES	6,532.	5,049.	827.	656.
UTILITIES	3,185.	2,462.	403.	320.
TOTAL	$ 6,528,827.	$ 4,622,040.	$ 45,250.	$ 1,861,537.

STATEMENT 3
FORM 990, PART III, LINE A
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION	GRANTS AND ALLOCATIONS	PROGRAM SERVICE EXPENSES
PROMOTE DEBATE ON ENVIRONMENTAL POLICIES & REGULATORY REFORM THROUGH THE TEN-SECOND RESPONSE NEWSLETER, NATIONAL POLICY ANALYSIS PAPERS, SEMINARS, SPEECHES, MEDIA INTERVIEWS, A WEB SITE, AND OP/EDS (SYNDICATED) INCLUDES FOREIGN GRANTS: NO		180,005.
PROMOTE POLICY/PRACTICE IMPROVEMENTS IN MINORITY ISSUES SUCH AS EDUCATION, INTACT FAMILIES, CIVIL RIGHTS, HEALTH CARE, WELFARE, & SOCIAL SECURITY THROUGH NEW VISIONS EDITORIALS TO 375 AFRICAN-AMERICAN NEWSPAPERS, SEMINARS, AND MEDIA		

STATEMENT 3 (CONTINUED)
FORM 990, PART III, LINE A
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION	GRANTS AND ALLOCATIONS	PROGRAM SERVICE EXPENSES
INTERVIEWS. INCLUDES FOREIGN GRANTS: NO		102,680.
WORK TO EDUCATE AMERICANS ABOUT GOVERNMENT ACCOUNTABILITY THROUGH SEMINARS, SPEECHES, MEDIA INTERVIEWS, & WEB SITE. INCLUDES FOREIGN GRANTS: NO		1,329.
EDUCATE THE PUBLIC ON ISSUES OF PUBLIC CONCERN, INCLUDING US DOMESTIC & FOREIGN POLICY, SOCIAL SECURITY/MEDICARE, GOVERNMENT ACCOUNTABILITY/REFORM, THE ENVIRONMENT, REGULATORY AFFAIRS, CAMPAIGN REFORM, HEALTH CARE, BUDGET & TAXES THROUGH OP/EDS, PRESS RELEASES, WEB SITE & E-MAILS, SPEECHES, SEMINARS, PETITIONS, CONFERENCES AND MEETINGS. INCLUDES FOREIGN GRANTS: NO		4,869,753.
	$ 0.	$ 5,153,767.

STATEMENT 4
FORM 990, PART IV, LINE 57
LAND, BUILDINGS, AND EQUIPMENT

CATEGORY	BASIS	ACCUM. DEPREC.	BOOK VALUE
FURNITURE AND FIXTURES	$ 117,620.	$ 46,548.	$ 71,072.
BUILDINGS	978,426.	30,816.	947,610.
LAND	316,647.		316,647.
TOTAL	$ 1,412,693.	$ 77,364.	$ 1,335,329.

STATEMENT 5
FORM 990, PART IV, LINE 58
OTHER ASSETS

NET INTANGIBLE ASSETS	19,616.
TOTAL	$ 19,616.

STATEMENT 6
FORM 990 , PART VI, LINE 89B
501(C)(3) AND 501(C)(4) ORGANIZATIONS

THE INVESTIGATION IN 2005 OF A FORMER MEMBER OF THE BOARD OF DIRECTORS DISCLOSED A SERIES OF CONTRIBUTIONS AND WITHDRAWALS IN 2002 AND 2003 THAT RESULTED IN EXCESS BENEFITS TO THE FORMER BOARD MEMBER. THESE TRANSACTIONS HAVE PREVIOUSLY BEEN VOLUNTARILY DISCLOSED TO THE INTERNAL REVENUE SERVICE.

STATEMENT 7
SCHEDULE A, PART I
COMPENSATION OF FIVE HIGHEST PAID EMPLOYEES

NAME AND ADDRESS	TITLE & AVERAGE HOURS WORKED	COMPEN-SATION	CONTRIBUTIO EBP & DC	EXPENSE ACCOUNT
DAVID ALMASI 501 CAPITOL CT. NE, # 200 WASHINGTON, DC 20002	EXEC DIR. 40	79,833.	0.	0.
	TOTAL	$ 79,833.	$ 0.	$ 0.

STATEMENT 8
SCHEDULE A, PART IV-A, LINE 22
OTHER INCOME

DESCRIPTION	(A) 2004	(B) 2003	(C) 2002	(D) 2001	(E) TOTAL
LIST RENTAL INCOME	$ 0.	$ 185.	$ 1,419.	$ 2,910.	$ 4,514.
DEBT FORGIVENESS	0.	0.	0.	1,522.	1,522.
	500.	0.	0.	0.	500.
	4,227.	0.	0.	0.	4,227.
TOTAL	$ 4,727.	$ 185.	$ 1,419.	$ 4,432.	$ 10,763.

12/31/05

2005 FEDERAL BOOK DEPRECIATION SCHEDULE

PAGE 1

NATIONAL CENTER FOR PUBLIC POLICY RESEARCH

52-1226614

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
	FORM 990/990-PF															
	AMORTIZATION															
17	MAC SOFTWARE	6/04/99		405							405	405	S/L	3		0
18	SOFTWARE	6/30/01		381							381	381	S/L	3		0
25	SOFTWARE	5/31/02		2,224							2,224	1,518	S/L	3		309
26	SOFTWARE	12/04/03		299							299	108	S/L	3		100
34	SOFTWARE	4/27/04		990							990	220	S/L	3		330
35	SOFTWARE	11/27/04		773							773	21	S/L	3		258
38	LOAN FEES	10/14/04		17,775							17,775	148	S/L	30		593
58	SOFTWARE	5/04/05		362							362		S/L	3		80
59	DREAMWEAVER 8 SOFTWARE	9/21/05		431							431		S/L	3		36
60	QUICKBOOKS SOFTWARE	10/20/05		185							185		S/L	3		10
61	FILEMAKER 7 SOFTWARE	12/09/05		317							317		S/L	3		9
	TOTAL AMORTIZATION			24,142		0	0	0	0	0	24,142	2,801				1,725
	BUILDINGS															
37	BUILDING	10/14/04		961,475							961,475	6,163	S/L	39		24,653
41	LIGHTING & WIRING	2/15/05		2,465							2,465		S/L	39		58
42	SIGNAGE	2/18/05		3,660							3,660		S/L	39		78
43	GLASS IN LOBBY AREA	3/24/05		2,706							2,706		S/L	39		52
44	GLASS IN LOBBY AREA	8/09/05		8,119							8,119		S/L	39		87
	TOTAL BUILDINGS			978,425		0	0	0	0	0	978,425	6,163				24,928

12/31/05

2005 FEDERAL BOOK DEPRECIATION SCHEDULE

NATIONAL CENTER FOR PUBLIC POLICY RESEARCH

52-1226614

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR.	SALVAG /BASIS REDUCT	DEPR BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
	FURNITURE AND FIXTURES															
1	DESK	11/27/90		643							643	643	S/L	5		0
2	EXECUTIVE DESK	8/10/93		423							423	423	S/L	7		0
15	4 DRAWER FILE & STORAGE	7/30/99		1,743							1,743	1,349	S/L	7		249
16	ARTWORK FOR OFFICE WALLS	11/19/99		559							559	407	S/L	7		80
40	OFFICE FURNITURE	2/18/05		31,862							31,862		S/L	7		3,793
45	OFFICE FURNITURE	3/01/05		1,284							1,284		S/L	7		153
46	OFFICE FURNITURE	5/26/05		4,503							4,503		S/L	7		375
47	OFFICE FURNITURE	11/28/05		2,242							2,242		S/L	7		27
50	LARGE FRIDGE	1/18/05		768							768		S/L	7		101
51	WINDOW SHADES	2/24/05		751							751		S/L	7		89
52	BLINDS	5/02/05		894							894		S/L	7		85
55	DESK-PEYTON	9/15/05		899							899		S/L	7		43
	TOTAL FURNITURE AND FIXTURE			46,571		0	0	0	0	0	46,571	2,822				4,995
	LAND															
36	LAND	10/14/04		316,647							316,647					0
	TOTAL LAND			316,647		0	0	0	0	0	316,647	0				0
	MACHINERY AND EQUIPMENT															
3	VCR	2/05/94		305							305	305	S/L	5		0
4	PRINTER-APPLE LASER WRIT	4/24/95		1,197							1,197	1,197	S/L	5		0
5	COMPUTER EQUIP MONITOR	4/24/95		924							924	924	S/L	5		0
6	COMP EQUIP -ONE POWER	5/30/95		1,851							1,851	1,851	S/L	5		0
7	2 MAGNAVOX TV/VCR COMBO	10/17/95		798							798	798	S/L	5		0

2005 FEDERAL BOOK DEPRECIATION SCHEDULE

NATIONAL CENTER FOR PUBLIC POLICY RESEARCH

52-1226614

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR.	SALVAG /BASIS REDUCT	DEPR BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
8	MONITOR	6/12/96		399							399	399	S/L	5		0
9	MAC 12/640 PS LASER PRINT	8/05/97	12/31/05	2,165							2,165	2,165	S/L	5		0
10	COMPUTER (DAVID RIDENOUR'	7/31/97		1,260							1,260	1,260	S/L	5		0
11	JAZZ DRIVE	10/03/97		403							403	403	S/L	5		0
12	MAC & PRINTER (KEREN'S)	12/08/97	12/31/05	1,852							1,852	1,852	S/L	5		0
13	240 MHRTZ G3 MACINTOSH	1/06/98	12/31/05	3,229							3,229	3,229	S/L	5		0
14	COMP. MAIL. MACH (LEASE)	3/08/98		1,800							1,800	1,800	S/L	5		0
20	USED IMAC COMPUTER	5/24/01		789							789	653	200DB	5		54
21	POWER MAC G4 COMPUTER	3/10/01		2,529							2,529	2,092	200DB	5		175
22	PRINTER & ACCESSORIES	3/16/01		2,834							2,834	2,344	200DB	5		196
23	COMPUTER REIMB TO AMY	4/16/02		4,779							4,779	3,403	200DB	5		550
24	COMPUTER & HARDDRIVE DA	3/31/02		2,330							2,330	1,659	200DB	5		268
27	COMPUTER	5/11/04		1,096							1,096	146	S/L	5		219
28	DESKTOP COMPUTER	11/01/04		2,911							2,911	97	S/L	5		582
29	LASER FAX MACHINE	1/22/04		873							873	160	S/L	5		175
30	CANON COPIER #2	12/20/04		2,111							2,111		S/L	5		422
31	CANON COPIER #1	8/05/04		2,019							2,019	168	S/L	5		404
32	COMPUTER	12/18/04		1,401							1,401		S/L	5		280
33	LAPTOP COMPUTER	10/26/04		2,966							2,966	99	S/L	5		593
48	SECURITY SYSTEM	3/15/05		7,542							7,542		S/L	7		898
49	HP LASERJET 4250 PRINTER	1/12/05		2,300							2,300		S/L	5		460
53	INTERN COMPUTERS	5/11/05		1,300							1,300		S/L	5		173
54	APPLE POWERBOOK G4	8/30/05		2,740							2,740		S/L	5		183
56	NK DELL COMPUTER	10/19/05		1,399							1,399		S/L	5		47
57	HP LASERJET 4240 PRNTR	12/09/05		1,275							1,275		S/L	5		21
	TOTAL MACHINERY AND EQUIPME			59,377		0	0	0	0	0	59,377	27,004				5,700

2005 FEDERAL BOOK DEPRECIATION SCHEDULE

NATIONAL CENTER FOR PUBLIC POLICY RESEARCH

52-1226614

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS PCT	CUR 179 BONUS	SPECIAL DEPR ALLOW.	PRIOR 179/ BONUS/ SP. DEPR	PRIOR DEC BAL DEPR.	SALVAG /BASIS REDUCT	DEPR BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
	MISCELLANEOUS															
19	LEASED MAILING MACHINE	11/20/98		11,914							11,914	11,914	S/L	5		0
39	LEASED TELEPHONE SYSTEMS	11/18/04		7,004							7,004	83	S/L	7		1,001
	TOTAL MISCELLANEOUS			18,918		0	0	0	0	0	18,918	11,997				1,001
	TOTAL DEPRECIATION			1,419,938		0	0	0	0	0	1,419,938	47,986				36,624
	GRAND TOTAL AMORTIZATION			24,142		0	0	0	0	0	24,142	2,801				1,725
	GRAND TOTAL DEPRECIATION			1,419,938		0	0	0	0	0	1,419,938	47,986				36,624
	DEPRECIATION ASSETS SOLD			7,246		0	0	0	0	0	7,246	7,246				0
	DEPR REMAINING ASSETS			1,412,692		0	0	0	0	0	1,412,692	40,740				36,624

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Form 8868 (Rev 12-2004) Page 2

- If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** and check this box ▶ [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1)

ENVELOPE POSTMARK DATE AUG 2006

Part II Additional (not automatic) 3-Month Extension of Time – Must File Original and One Copy.

Type or print	Name of Exempt Organization	Employer identification number
File by the extended due date for filing the return See instructions	NATIONAL CENTER FOR PUBLIC POLICY RESEARCH	52-1226614
	Number, street, and room or suite number If a P O box, see instructions: 501 CAPITOL COURT, N.E. #200	For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions. WASHINGTON, DC 20002	

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

[X] Form 990	[ ] Form 990-T (section 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-BL	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-EZ	[ ] Form 1041-A	[ ] Form 8870
[ ] Form 990-PF	[ ] Form 4720	

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in care of ▶ AMY RIDENOUR
  Telephone No. ▶ 202-543-4110 FAX No ▶
- 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 organizations four digit Group Exemption Number (GEN) ____ If this is for the **whole** group, check this box ▶ [ ] If it is **part** of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until 11/15 , 20 06

5 For calendar year 2005 , or other tax year beginning ____ , 20 __ , and ending ____ , 20 __

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

7 State in detail why you need the extension INFORMATION NEEDED TO FILE A COMPLETE AND ACCURATE RETURN IS NOT AVAILABLE AT THIS TIME.

8a 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, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 $

c **Balance Due.** Subtract line 8b from line 8a. 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 $

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 ▶ Title ▶ CPA Date ▶ 8/14/06

Notice to Applicant – To be Completed by the IRS

[✓] We **have** approved this application Please attach this form to the organization's return

[ ] We **have not** approved this application However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions) This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely filed return Please attach this form to the organization's return.

[ ] We **have not** approved this application After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file We are not granting a 10-day grace period

[ ] We **cannot consider** this application because it was filed after the extended due date of the return for which an extension was requested

[ ] Other

Director By Date

RECEIVED AUG 21 2006 OGDEN UT IRS-OSC 805

Alternate Mailing Address — Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above

Type or print	
	Name: POLAN WHITE & ASSOCIATES
	Number and street (include suite, room, or apartment number) or a P.O. box number: 1901 RESEARCH BLVD SUITE 300
	City or town, province or state, and country (including postal or ZIP code): ROCKVILLE, MD 20850

Form 8868 (Rev December 2004)

Department of the Treasury Internal Revenue Service

Application for Extension of Time to File an Exempt Organization Return

► File a separate application for each return

OMB No 1545-1709

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

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)

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

Electronic Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6-months for corporate Form 990-T filers) However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868 For more details on the electronic filing of this form, visit *www.irs.gov/efile*

Type or print File by the due date for filing your return See instructions.

Name of Exempt Organization: NATIONAL CENTER FOR PUBLIC POLICY RESEARCH

Employer identification number: 52-1226614

Number, street, and room or suite number If a P O box, see instructions: 501 CAPITOL COURT, N.E. #200

City, town or post office For a foreign address, see instructions / state / ZIP code: WASHINGTON, DC 20002

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

[X] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (section 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ► AMY RIDENOUR

Telephone No ► 202-543-4110 FAX No ►

- 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-months for a **Form 990-T corporation**) extension of time until 8/15, 20 06, to file the exempt organization return for the organization named above The extension is for the organization's return for.

► [X] calendar year 20 05 or

► [ ] tax year beginning ________, 20 ___, and ending ________, 20 ___

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 $ 0.

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 $ 0.

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 $ 0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form **8868** (Rev 12-2004)

CPA 5/10/06