

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)

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

For the 2002 calendar year, or tax year period beginning APR 1, 2002 and ending MAR 31, 2003

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: WISCONSIN POLICY RESEARCH INSTITUTE, INC. D Employer identification number: 39-1592727. E Telephone number: (262) 241-0514. F Accounting method: [X] Cash [] Accrual. H and I are not applicable to section 527 organizations.

G Web site: N/A. J Organization type: [X] 501(c)(3). K Check here [] if the organization's gross receipts are normally not more than \$25,000. L Gross receipts: 571,833. M Check [] if the organization is not required to attach Sch B.

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

Table with 21 rows and 4 columns. Rows include: 1 Contributions, gifts, grants, and similar amounts received; 2 Program service revenue; 3 Membership dues and assessments; 4 Interest on savings and temporary cash investments; 5 Dividends and interest from securities; 6 Gross rents; 7 Other investment income; 8 Gross amount from sale of assets other than inventory; 9 Special events and activities; 10 Gross sales of inventory; 11 Other revenue; 12 Total revenue; 13 Program services; 14 Management and general; 15 Fundraising; 16 Payments to affiliates; 17 Total expenses; 18 Excess for public; 19 Net assets or fund balances at beginning of year; 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year.

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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 \$ _____ | 22 | | | |
| 23 Specific assistance to individuals (attach schedule) | 23 | | | |
| 24 Benefits paid to or for members (attach schedule) | 24 | | | |
| 25 Compensation of officers, directors, etc | 25 124,500. | 118,275. | 6,225. | 0. |
| 26 Other salaries and wages | 26 83,460. | 79,287. | 4,173. | |
| 27 Pension plan contributions | 27 18,427. | 17,506. | 921. | |
| 28 Other employee benefits | 28 36,611. | 34,780. | 1,831. | |
| 29 Payroll taxes | 29 13,454. | 12,781. | 673. | |
| 30 Professional fundraising fees | 30 | | | |
| 31 Accounting fees | 31 5,775. | 5,486. | 289. | |
| 32 Legal fees | 32 2,624. | 2,493. | 131. | |
| 33 Supplies | 33 6,875. | 6,531. | 344. | |
| 34 Telephone | 34 2,288. | 2,174. | 114. | |
| 35 Postage and shipping | 35 5,869. | 5,576. | 293. | |
| 36 Occupancy | 36 8,084. | 7,680. | 404. | |
| 37 Equipment rental and maintenance | 37 | | | |
| 38 Printing and publications | 38 44,899. | 42,654. | 2,245. | |
| 39 Travel | 39 11,636. | 11,054. | 582. | |
| 40 Conferences, conventions, and meetings | 40 | | | |
| 41 Interest | 41 | | | |
| 42 Depreciation, depletion, etc (attach schedule) | 42 2,684. | 2,550. | 134. | |
| 43 Other expenses not covered above (itemize) | | | | |
| a RESEARCH FEES | 43a 164,000. | 164,000. | | |
| b INSURANCE | 43b 5,125. | 4,869. | 256. | |
| c MISCELLANEOUS | 43c 401. | 381. | 20. | |
| d DUES AND SUBSCRIPTIONS | 43d 3,405. | 3,235. | 170. | |
| e | 43e | | | |
| 44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D) carry these totals to lines 13-15 | 44 540,117. | 521,312. | 18,805. | 0. |

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? **RESEARCH**

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 RESEARCH ON PUBLIC POLICY IN THE STATE OF WISCONSIN AND PREPARATION OF REPORTS WHICH ARE DISTRIBUTED TO THE MEDIA, STATE LEGISLATURE AND OTHER INTERESTED PARTIES. (Grants and allocations \$ _____) | 521,312. |
| b _____ (Grants and allocations \$ _____) | |
| c _____ (Grants and allocations \$ _____) | |
| d _____ (Grants and allocations \$ _____) | |
| e Other program services (attach schedule) (Grants and allocations \$ _____) | |
| f Total of Program Service Expenses (should equal line 44, column (B), Program services) | 521,312. |

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 | 65,394. | 45 33,385. |
| | 46 Savings and temporary cash investments | 923,314. | 46 832,812. |
| | 47 a Accounts receivable | 47a | 47c |
| | b Less allowance for doubtful accounts | 47b | |
| | 48 a Pledges receivable | 48a | 48c |
| | b Less allowance for doubtful accounts | 48b | |
| | 49 Grants receivable | | 49 |
| | 50 Receivables from officers, directors, trustees, and key employees | | 50 |
| | 51 a Other notes and loans receivable | 51a | 51c |
| | b Less allowance for doubtful accounts | 51b | |
| | 52 Inventories for sale or use | | 52 |
| | 53 Prepaid expenses and deferred charges | | 53 |
| | 54 Investments - securities STMT 1 STMT 2 <input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV | 949,492. | 54 1,103,615. |
| | 55 a Investments - land, buildings, and equipment basis | 55a | 55c |
| | b Less accumulated depreciation | 55b | |
| 56 Investments - other | | 56 | |
| 57 a Land, buildings, and equipment basis | 57a 20,045. | 57c 7,070. | |
| b Less accumulated depreciation | 57b 12,975. | | |
| 58 Other assets (describe ▶) | | 58 | |
| 59 Total assets (add lines 45 through 58) (must equal line 74) | 1,945,166. | 59 1,976,882. | |
| Liabilities | 60 Accounts payable and accrued expenses | | 60 |
| | 61 Grants payable | | 61 |
| | 62 Deferred revenue | | 62 |
| | 63 Loans from officers, directors, trustees, and key employees | | 63 |
| | 64 a Tax exempt bond liabilities | | 64a |
| | b Mortgages and other notes payable | | 64b |
| | 65 Other liabilities (describe ▶) | | 65 |
| 66 Total liabilities (add lines 60 through 65) | 0. | 66 0. | |
| 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 | 798,762. | 67 853,584. |
| | 68 Temporarily restricted | 1,146,404. | 68 1,123,298. |
| | 69 Permanently restricted | | 69 |
| | Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74 | | |
| | 70 Capital stock, trust principal, or current funds | | 70 |
| | 71 Paid in or capital surplus, or land, building, and equipment fund | | 71 |
| | 72 Retained earnings, endowment, accumulated income, or other funds | | 72 |
| | 73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21) | 1,945,166. | 73 1,976,882. |
| | 74 Total liabilities and net assets / fund balances (add lines 66 and 73) | 1,945,166. | 74 1,976,882. |

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

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

| | | |
|---|----------|----------|
| a Total revenue, gains, and other support per audited financial statements | a | 571,833. |
| 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 | 571,833. |
| 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 | 571,833. |

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

| | | |
|---|----------|----------|
| a Total expenses and losses per audited financial statements | a | 540,117. |
| 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 | 540,117. |
| 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 | 540,117. |

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 |
|----------------------|--|---|---|--|
| SEE STATEMENT 3 | | 124,500. | 8,347. | 0. |
| | | | | |
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75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? If "Yes," attach schedule Yes No Form 990 (2002)

Part VI Other Information

Form with questions 76-92 and Yes/No columns. Includes questions about IRS reporting, organizational changes, income, lobbying, and tax-exempt status.

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

Table with 5 columns: (A) Business code, (B) Amount, (C) Exclusion code, (D) Amount, (E) Related or exempt function income. Rows include 93 Program service revenue, 94 Membership dues and assessments, 95 Interest on savings and temporary cash investments, 96 Dividends and interest from securities, 97 Net rental income or (loss) from real estate, 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, 104 Subtotal, 105 Total.

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)

Table with 2 columns: 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)

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

Table with 5 columns: (A) Name, address, and EIN of corporation, partnership, or disregarded entity; (B) Percentage of ownership interest; (C) Nature of activities; (D) Total income; (E) End-of-year assets

Part X Information Regarding Transfers Associated with

(a) Did the organization, during the year, receive any funds, directly or indirectly, from... (b) Did the organization, during the year, pay premiums, directly or indirectly, on a... Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Signature and preparer information section including 'Please Sign Here' with signature of Jan Miller, 'Preparer's signature' with signature of [redacted], and 'Preparer's Use Only' with firm name SATTELL, JOHNSON, APPEL and address 700 NORTH WATER STREET, MILWAUKEE, WI 53202-42...

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

WISCONSIN POLICY RESEARCH INSTITUTE, INC

Employer identification number

39 1592727

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 |
|---|--|------------------|---|--|
| NONE | | | | |
| ----- | | | | |
| ----- | | | | |
| ----- | | | | |
| ----- | | | | |
| Total number of other employees paid over \$50,000 ▶ | 0 | | | |

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

| (a) Name and address of each independent contractor paid more than \$50,000 | (b) Type of service | (c) Compensation |
|---|---------------------|------------------|
| NONE | | |
| ----- | | |
| ----- | | |
| ----- | | |
| ----- | | |
| Total number of others receiving over \$50,000 for professional services ▶ | 0 | |

| Part III Statements About Activities (See page 2 of the instructions) | 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 1 of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities | 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 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)

7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)

9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ _____

10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A.)

11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)

11b A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)

12 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)

13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

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

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

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting
 Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

| Calendar year (or fiscal year beginning in) | (a) 2001 | (b) 2000 | (c) 1999 | (d) 1998 | (e) Total |
|--|----------|----------|----------|----------|----------------|
| 15 Gifts, grants, and contributions received (Do not include unusual grants See line 28) | 578,108. | 558,461. | 676,617. | 516,071. | 2,329,257. |
| 16 Membership fees received | | | | | |
| 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose | | | | | |
| 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 | 69,636. | 105,384. | 91,331. | 96,000. | 362,351. |
| 19 Net income from unrelated business activities not included in line 18 | | | | | |
| 20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf | | | | | |
| 21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge | | | | | |
| 22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets | | | | | |
| 23 Total of lines 15 through 22 | 647,744. | 663,845. | 767,948. | 612,071. | 2,691,608. |
| 24 Line 23 minus line 17 | 647,744. | 663,845. | 767,948. | 612,071. | 2,691,608. |
| 25 Enter 1% of line 23 | 6,477. | 6,638. | 7,679. | 6,121. | |
| 26 Organizations described on lines 10 or 11 a Enter 2% of amount in column (e), line 24 | | | | | 26a 53,832. |
| b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a Do not file this list with your return Enter the sum of all these excess amounts | | | | | 26b 1,613,504. |
| c Total support for section 509(a)(1) test Enter line 24, column (e) | | | | | 26c 2,691,608. |
| d Add Amounts from column (e) for lines 18 362,351. 19 22 1,613,504. | | | | | 26d 1,975,855. |
| e Public support (line 26c minus line 26d total) | | | | | 26e 715,753. |
| f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) | | | | | 26f 26.5920% |
| 27 Organizations described on line 12 a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return Enter the sum of such amounts for each year N/A | | | | | |
| b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year N/A | | | | | |
| c Add Amounts from column (e) for lines 15 16 17 20 21 | | | | | 27c N/A |
| d Add Line 27a total and line 27b total | | | | | 27d N/A |
| e Public support (line 27c total minus line 27d total) | | | | | 27e N/A |
| f Total support for section 509(a)(2) test Enter amount on line 23, column (e) | | | | | 27f N/A |
| g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) | | | | | 27g N/A % |
| h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) | | | | | 27h N/A % |

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return Do not include these grants in line 15

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 - | | | | | | | | | | | | | | |
| | <table border="0"> <tr> <td>If the amount on line 40 is -</td> <td>The lobbying nontaxable amount is -</td> </tr> <tr> <td>Not over \$500 000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500 000 but not over \$1 000 000</td> <td>\$100 000 plus 15% of the excess over \$500 000</td> </tr> <tr> <td>Over \$1 000 000 but not over \$1 500 000</td> <td>\$175 000 plus 10% of the excess over \$1 000 000</td> </tr> <tr> <td>Over \$1 500 000 but not over \$17 000 000</td> <td>\$225 000 plus 5% of the excess over \$1 500 000</td> </tr> <tr> <td>Over \$17 000 000</td> <td>\$1 000 000</td> </tr> </table> | If the amount on line 40 is - | The lobbying nontaxable amount is - | Not over \$500 000 | 20% of the amount on line 40 | Over \$500 000 but not over \$1 000 000 | \$100 000 plus 15% of the excess over \$500 000 | Over \$1 000 000 but not over \$1 500 000 | \$175 000 plus 10% of the excess over \$1 000 000 | Over \$1 500 000 but not over \$17 000 000 | \$225 000 plus 5% of the excess over \$1 500 000 | Over \$17 000 000 | \$1 000 000 | 41 | |
| If the amount on line 40 is - | The lobbying nontaxable amount is - | | | | | | | | | | | | | | |
| Not over \$500 000 | 20% of the amount on line 40 | | | | | | | | | | | | | | |
| Over \$500 000 but not over \$1 000 000 | \$100 000 plus 15% of the excess over \$500 000 | | | | | | | | | | | | | | |
| Over \$1 000 000 but not over \$1 500 000 | \$175 000 plus 10% of the excess over \$1 000 000 | | | | | | | | | | | | | | |
| Over \$1 500 000 but not over \$17 000 000 | \$225 000 plus 5% of the excess over \$1 500 000 | | | | | | | | | | | | | | |
| Over \$17 000 000 | \$1 000 000 | | | | | | | | | | | | | | |
| 42 | Grassroots nontaxable amount (enter 25% of line 41) | 42 | | | | | | | | | | | | | |
| 43 | Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36 | 43 | | | | | | | | | | | | | |
| 44 | Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38 | 44 | | | | | | | | | | | | | |

Caution If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 11 of the instructions)

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

Part VI-B Lobbying Activity by Nonelecting Public Charities

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

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

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

FORM 990

NON-GOVERNMENT SECURITIES

STATEMENT 1

| SECURITY DESCRIPTION | CORPORATE STOCKS | CORPORATE BONDS | OTHER PUBLICLY TRADED SECURITIES | OTHER SECURITIES | TOTAL NON-GOV'T SECURITIES |
|----------------------|------------------|-----------------|----------------------------------|------------------|----------------------------|
| MUTUAL FUND | | | | 358,855. | 358,855. |
| TO 990, LN 54 COL B | | | | 358,855. | 358,855. |

FORM 990 GOVERNMENT SECURITIES STATEMENT 2

| DESCRIPTION | U.S. GOVERNMENT | STATE AND LOCAL GOV'T | TOTAL GOV'T SECURITIES |
|-----------------------------------|--------------------|--------------------------|---------------------------|
| U.S TREASURY NOTES | 744,760. | | 744,760. |
| TOTAL TO FORM 990, LINE 54, COL B | 744,760. | | 744,760. |

FORM 990 PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 3

| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | EXPENSE ACCOUNT |
|---|--------------------------|-------------------|---------------------------------|--------------------|
| JAMES H. MILLER 11516 N. PORT WASHINGTON RD. MEQUON, WI 53092 | PRESIDENT 40 | 124,500. | 8,347. | 0. |
| ROBERT C. BUCHANAN P.O. BOX 2215 APPLETON, WI 54913-2215 | DIRECTOR 0. | 0. | 0. | 0. |
| ROGER P. HAUCK 3512 BLACKHAWK DRIVE MADISON, WI 53705 | DIRECTOR 0. | 0. | 0. | 0. |
| JAMES R. KLAUSER 231 W. MICHIGAN ST PO BOX 2949 MILWAUKEE, WI 53201 | DIRECTOR 0. | 0. | 0. | 0. |
| ROBERT J. O'TOOLE P.O. BOX 23971 MILWAUKEE, WI 53223-0971 | DIRECTOR 0. | 0. | 0. | 0. |
| SAN W. ORR, JR. P.O. BOX 65 WAUSAU, WI 54402-0065 | DIRECTOR 0. | 0. | 0. | 0. |
| PAUL J. SCHIERL 2413 HAZELWOOD LANE, SUITE B GREEN BAY, WI 54304 | DIRECTOR 0. | 0. | 0. | 0. |
| TIMOTHY R. SHEEHY 756 NORTH MILWAUKEE ST. MILWAUKEE, WI 53202 | DIRECTOR 0. | 0. | 0. | 0. |
| EDWARD J. ZORE 720 E. WISCONSIN AVENUE MILWAUKEE, WI 53202 | DIRECTOR 0. | 0. | 0. | 0. |
| CATHERINE C. DELLIN 550 SOUTH AVENUE GLENCOE, IL 60022 | DIRECTOR 0. | 0. | 0. | 0. |
| DENNIS J. KUESTER 770 NORTH WATER STREET MILWAUKEE, WI 53202 | DIRECTOR 0. | 0. | 0. | 0. |
| TOTALS INCLUDED ON FORM 990, PART V | | 124,500. | 8,347. | 0. |

Depreciation and Amortization 990
(Including Information on Listed Property)

▶ See separate instructions ▶ Attach to your tax return

| | | |
|--|---|----------------------------|
| Name(s) shown on return | Business or activity to which this form relates | Identifying number |
| WISCONSIN POLICY RESEARCH INSTITUTE, INC | | FORM 990 PAGE 2 39-1592727 |

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 instructions for a higher limit for certain businesses | 1 | 24,000. |
| 2 Total cost of section 179 property placed in service (see instructions) | 2 | |
| 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 | |
| 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions | 5 | |

| 6 (a) Description of property | (b) Cost (business use only) | (c) Elected cost |
|-------------------------------|------------------------------|------------------|
| | | |
| | | |
| | | |
| | | |

| | | |
|---|----|--|
| 7 Listed property Enter amount from line 29 | 7 | |
| 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 | 8 | |
| 9 Tentative deduction Enter the smaller of line 5 or line 8 | 9 | |
| 10 Carryover of disallowed deduction from line 13 of your 2001 Form 4562 | 10 | |
| 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 | 11 | |
| 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 | 12 | |
| 13 Carryover of disallowed deduction to 2003 Add lines 9 and 10, less line 12 | 13 | |

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 instructions) | 14 | |
| 15 Property subject to section 168(f)(1) election (see instructions) | 15 | |
| 16 Other depreciation (including ACRS) (see instructions) | 16 | |

Part III MACRS Depreciation (Do not include listed property) (See instructions)

Section A

| | | |
|---|----|--------|
| 17 MACRS deductions for assets placed in service in tax years beginning before 2002 | 17 | 2,126. |
| 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"/> | | |

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 (business/investment use only - see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|--------------------------------|--------------------------------------|--|---------------------|----------------|------------|----------------------------|
| 19a 3 year property | | | | | | |
| b 5 year property | | 2,789. | 5 YRS | AHY | MC200 | 558. |
| c 7 year property | | | | | | |
| d 10 year property | | | | | | |
| e 15 year property | | | | | | |
| f 20-year property | | | | | | |
| g 25 year property | | | 25 yrs | | S/L | |
| h Residential rental property | / | | 27 5 yrs | MM | S/L | |
| | / | | 27 5 yrs | MM | S/L | |
| i Nonresidential real property | / | | 39 yrs | MM | S/L | |
| | / | | | MM | S/L | |

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

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

Part IV Summary (See instructions)

| | | |
|--|----|--------|
| 21 Listed property Enter amount from line 28 | 21 | |
| 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 instr | 22 | 2,684. |
| 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 | |

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)
Note For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

Section A - Depreciation and Other Information (Caution See instructions for limits for passenger automobiles)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

| (a) Type of property (list vehicles first) | (b) Date placed in service | (c) Business/ investment use percentage | (d) Cost or other basis | (e) Basis for depreciation (business/investment use only) | (f) Recovery period | (g) Method/ Convention | (h) Depreciation deduction | (i) Elected section 179 cost |
|--|----------------------------------|--|-------------------------------|--|---------------------------|------------------------------|----------------------------------|---------------------------------------|
| 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use | | | | | | | 25 | |
| 26 Property used more than 50% in a qualified business use | | | | | | | | |
| | | % | | | | | | |
| | | % | | | | | | |
| | | % | | | | | | |
| 27 Property used 50% or less in a qualified business use | | | | | | | | |
| | | % | | | | S/L | | |
| | | % | | | | S/L | | |
| | | % | | | | S/L | | |
| 28 Add amounts in column (h) lines 25 through 27 Enter here and on line 21, page 1 | | | | | | | 28 | |
| 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 | | | | | | | | 29 |

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
 If you provided vehicles to your employees first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

| | (a) Vehicle | | (b) Vehicle | | (c) Vehicle | | (d) Vehicle | | (e) Vehicle | | (f) Vehicle | |
|--|----------------|----|----------------|----|----------------|----|----------------|----|----------------|----|----------------|----|
| | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
| 30 Total business/investment miles driven during the year (do not include commuting miles) | | | | | | | | | | | | |
| 31 Total commuting miles driven during the year | | | | | | | | | | | | |
| 32 Total other personal (noncommuting) miles driven | | | | | | | | | | | | |
| 33 Total miles driven during the year Add lines 30 through 32 | | | | | | | | | | | | |
| 34 Was the vehicle available for personal use during off duty hours? | | | | | | | | | | | | |
| 35 Was the vehicle used primarily by a more than 5% owner or related person? | | | | | | | | | | | | |
| 36 Is another vehicle available for personal use? | | | | | | | | | | | | |

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons

| | Yes | No |
|---|-----|----|
| 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting by your employees? | | |
| 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See instructions for vehicles used by corporate officers, directors, or 1% or more owners | | |
| 39 Do you treat all use of vehicles by employees as personal use? | | |
| 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? | | |
| 41 Do you meet the requirements concerning qualified automobile demonstration use? Note If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles | | |

Part VI Amortization

| (a) Description of costs | (b) Date amortization begins | (c) Amortizable amount | (d) Code section | (e) Amortization period or percentage | (f) Amortization for this year |
|---|---------------------------------|---------------------------|---------------------|--|-----------------------------------|
| 42 Amortization of costs that begins during your 2002 tax year | | | | | |
| | | | | | |
| 43 Amortization of costs that began before your 2002 tax year | | | | | 43 |
| 44 Total Add amounts in column (f) See instructions for where to report | | | | | 44 |

Wisconsin Policy Research Institute, Inc
39-1592727
Form 990
03/31/03

Election Out of Additional Depreciation Under Section 168(k)

Taxpayer hereby elects under Code Section 168(k)(2)(C)(iii) not to apply Code Section 168(k) to all property in all classes of qualified property