

Return of Organization Exempt from Income Tax

2000

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2000 calendar year, or tax year period beginning, 2000, and ending, 20

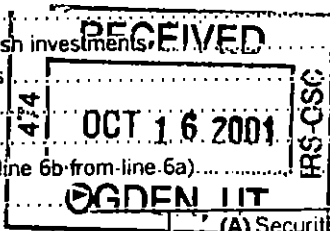
B Check if applicable: Change of address, Change of name, Initial return, Final return, Amended return. C Name of organization: Congress for the New Urbanism. D Employer Identification Number: 65-0483737. E Telephone number: (415) 495-2255. F Check if application pending.

G Organization type (check only one): [X] 501(c) 3 (insert no.) [] 527 or [] 4947(a)(1). Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

J Accounting method: [] Cash [X] Accrual [] Other (specify). K Check here if the organization's gross receipts are normally not more than \$25,000. Note: H and I are not applicable to section 527 orgs.

Part III Revenue, Expenses, and Changes in Net Assets or Fund Balances (see instructions)

Table with 21 rows and 2 columns. Row 1: Contributions, gifts, grants, and similar amounts received. Total revenue (line 12): 1,372,545. Total expenses (line 17): 1,472,684. Excess or deficit (line 18): -100,139.



SCANNED OCT 7 2009

FORM 990

10

Part III 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 \$ _____ non-cash \$ _____)	22			
23 Specific assistance to individuals (attach sch)	23			
24 Benefits paid to or for members (attach sch)	24			
25 Compensation of officers, directors, etc	25	125,000.	114,248.	10,752.
26 Other salaries and wages	26	242,586.	188,127.	54,459.
27 Pension plan contributions	27			
28 Other employee benefits	28	25,617.	21,071.	4,546.
29 Payroll taxes	29	24,728.	20,343.	4,385.
30 Professional fundraising fees	30			
31 Accounting fees	31			
32 Legal fees	32			
33 Supplies	33	31,562.	10,153.	21,409.
34 Telephone	34	18,840.	9,420.	9,420.
35 Postage and shipping	35	31,744.	22,664.	9,080.
36 Occupancy	36	150,747.	127,719.	23,028.
37 Equipment rental and maintenance	37			
38 Printing and publications	38	80,281.	76,175.	4,106.
39 Travel	39	105,667.	99,788.	5,879.
40 Conferences, conventions, and meetings	40			
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	42	4,694.	4,177.	517.
43 Other expenses (itemize):				
a Contract Services	43a	370,001.	360,965.	9,036.
b Membership Public	43b	121,302.	121,302.	0.
c Catering	43c	72,855.	63,616.	9,239.
d Miscellaneous	43d	42,714.	37,538.	5,176.
e See Other Expenses Stmt	43e	24,346.	22,671.	1,675.
44 Total functional expenses (add lines 22 - 43). Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	1,472,684.	1,299,977.	172,707.

Reporting of Joint Costs - Did you report in column (B) (program services) any joint costs from a combined educational campaign and fundraising solicitation? Yes No
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to program services \$ _____; (iii) the amount allocated to management and general \$ _____; and (iv) the amount allocated to fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? <u>Educational</u>	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)
a <u>Organize and produce meetings, conferences and publications dedicated to refinement and dissemination of the principles and techniques of New Urbanism.</u> (Grants and allocations \$ 0.)	1,299,977.
b _____ (Grants and allocations \$ _____)	
c _____ (Grants and allocations \$ _____)	
d _____ (Grants and allocations \$ _____)	
e Other program services (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), program services)	1,299,977.

Part IV Balance Sheets (See instructions)

		(A) Beginning of year		(B) End of year	
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.					
ASSETS	45 Cash — non-interest-bearing	198,756.	45	89,670.	
	46 Savings and temporary cash investments		46	87,073.	
	47a Accounts receivable	99,405.			
	b Less: allowance for doubtful accounts		47c	99,405.	
	48a Pledges receivable				
	b Less: allowance for doubtful accounts		48c		
	49 Grants receivable		49	225,000.	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50		
	51a Other notes & loans receivable (attach schedule)				
	b Less: allowance for doubtful accounts		51c		
	52 Inventories for sale or use		52		
	53 Prepaid expenses and deferred charges		53	1,780.	
	54 Investments — securities (attach schedule)	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54		
	55a Investments — land, buildings, & equipment: basis				
	b Less: accumulated depreciation (attach schedule)		55c		
	56 Investments — other (attach schedule)		56		
	57a Land, buildings, and equipment: basis	30,382.			
	b Less: accumulated depreciation (attach schedule)	16,033.	15,467.	57c	14,349.
	58 Other assets (describe Deposits)		14,885.	58	1,885.
59 Total assets (add lines 45 through 58) (must equal line 74)		229,108.	59	519,162.	
LIABILITIES	60 Accounts payable and accrued expenses	5,229.	60	64,065.	
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63		
	64a Tax-exempt bond liabilities (attach schedule)		64a		
	b Mortgages and other notes payable (attach schedule)		64b		
	65 Other liabilities (describe)		65		
66 Total liabilities (add lines 60 through 65)		5,229.	66	64,065.	
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	223,879.	67	215,097.	
	68 Temporarily restricted		68	240,000.	
	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 and column (B) must equal line 21)		223,879.	73	455,097.
	74 Total liabilities and net assets/fund balances (add lines 66 and 73)		229,108.	74	519,162.

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

BAA

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

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

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

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

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

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
Shelley Poticha San Francisco, CA 94103	Exec Dir 40	125,000.	0.	0.
Peter Calthorpe Berkeley, CA 94710	Bd Mbr 1	0.	0.	0.
Elizabeth Moule Los Angeles, CA 90014	Bd Mbr 1	0.	0.	0.
Andres Duany Miami, FL 33135	Bd Mbr 1	0.	0.	0.
Stefanos Polyzoides Pasadena, CA 91106	Chair 1	0.	0.	0.
Daniel Solomon San Francisco, CA 94105	Bd Mbr 1	0.	0.	0.
Robert Davis San Francisco, CA 94118	Bd Mbr 1	0.	0.	0.
John Norquist Milwaukee, WI 53202	Pres 1	0.	0.	0.
Jonathan Barnett Washington, DC 20016	Bd Mbr 1	0.	0.	0.
See List of Officers, Etc. Statement		0.	0.	0.

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

Part VI Other Information (See specific instructions.)

		N/A	Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity			X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes.			X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?			X
78b	If 'Yes,' has it filed a tax return on Form 990-T for this year?			
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement			X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc. to any other exempt or nonexempt organization?			X
b If 'Yes,' enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.				
81a	Enter the amount of political expenditures, direct or indirect, as described in the instructions	81a		0.
81b	Did the organization file Form 1120-POL for this year?			X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?			X
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 for reporting in Part III.)				
82b		82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?		X	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?			X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?				
84b		84b		
85a	501(c)(4), (5), or (6) organizations. Were substantially all dues nondeductible by members?			
85b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.				
85c	Dues, assessments, and similar amounts from members	85c		
85d	Section 162(e) lobbying and political expenditures	85d		
85e	Aggregate nondeductible amount of Section 6033(e)(1)(A) dues notices	85e		
85f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f		
85g	Does the organization elect to pay the Section 6033(e) tax on the amount in 85f?			
85h	If Section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?			
86a	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a		
86b	b Gross receipts, included on line 12, for public use of club facilities	86b		
87a	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a		
87b	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b		
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			X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: Section 4911 ▶ 0.; Section 4912 ▶ 0.; Section 4955 ▶ 0.			
89b	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			X
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under Sections 4912, 4955, and 4958 ▶ 0.				
d Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ 0.				
90a	List the states with which a copy of this return is filed ▶ California			
90b	b Number of employees employed in the pay period that includes March 12, 2000 (see instructions)	90b		8
91	The books are in care of ▶ CNU Telephone number ▶ (415) 495-2255 Located at ▶ 5 - 3rd Street, San Francisco CA ZIP code ▶ 94103			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92			

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

	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	
Enter gross amounts unless otherwise indicated.					
93 Program service revenue:					
a Congresses & Events					429,870.
b Publications					19,852.
c Gov't Contracts					360,082.
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					272,516.
95 Interest on savings & temporary cash invmnts					
96 Dividends & interest from securities			14	5,106.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b Miscellaneous			01	3,919.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				9,025.	1,082,320.
105 Total (add line 104, columns (B), (D), and (E))					1,091,345.

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

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

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93a	Events bring leadership in town planning & urban development together for programs open to architects, planners, city managers, politicians and developers - this is the orgnization's exempt purpose
	See Relationship of Activities to the Accomplishment of Exempt Purposes Statement

Part IX: Information Regarding Taxable Subsidiaries and Disregarded Entities (See 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
	%			
	%			
	%			
	%			

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

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

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

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

accompanying schedules and statements, and to the best of my knowledge and belief, it is true and correct on all information of which preparer has any knowledge. (See instructions.)

Date: 10/11/01
 Type or Print Name and Title: Shelley Poticha, Executive Director
 Preparer's SSN or PTIN: _____

(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.**

Name of the Organization Congress for the New Urbanism	Employer Identification Number 65-0483737
--	---

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 & deferred compensation	(e) Expense account and other allowances
Andy Shafer San Francisco, CA 94103	Administrator 40	54,459.	0.	0.

Total number of other employees paid over \$50,000	None			

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation

Total number of others receiving over \$50,000 for professional services	None	

Part III Statements About Activities

	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 ▶ \$ _____ 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 of its 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:		
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 . P . t . V . , . F . m . 990 . .	2d	X
e Transfer of any part of its income or assets?	2e	X
If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.		
3 Does the organization make grants for scholarships, fellowships, student loans, etc?	3	X
4a Do you have a section 403(b) annuity plan for your employees?	4a	X
b 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. (See instructions.)		

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

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

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

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

Part IV Private School Questionnaire (See instructions.)
 (To be completed Only by schools that checked the box on line 6 in Part IV)

N/A

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?		
If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)			

32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)			

33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)			

34 a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended?		
If you answered 'Yes' to either 34a or b, please explain using an attached statement.			

35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.		

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

N/A

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

Limits on Lobbying Expenditures

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

		(a) Affiliated group totals	(b) To be completed for all electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table —		
	If the amount on line 40 is —		
	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.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots non-taxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities
(For reporting only by organizations that did not complete Part VI-A) (See instructions.)

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

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

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

Form 990, Page 2, Part II, Line 43

Other Expenses Stmt

	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Other expenses (itemize)				
Recording & AV	22,671.	22,671.	0.	0.
Insurance	1,675.	0.	1,675.	0.
Total	24,346.	22,671.	1,675.	0.

Form 990, Page 4, Part V

List of Officers, Etc. Statement

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
Harvey Gantt Charlotte, NC 28202	Bd Mbr 1	0.	0.	0.
Judy Corbett Sacramento, CA 94814	Bd Mbr 1	0.	0.	0.
Jacky Grimshaw Chicago, IL 60647	Bd Mbr 1	0.	0.	0.
Raymond Gindroz Pittsburgh, PA 15219	Bd Mbr 1	0.	0.	0.
Jean Driscoll Berkeley, CA 94708	Treas 1	0.	0.	0.
Susan Mudd Milwaukee, WI 53203	Bd Mbr 1	0.	0.	0.
Daniel Slone Richmond, VA 23219	Bd Mbr 1	0.	0.	0.
Art Lomenick Addison, TX 75001	Bd Mbr 1	0.	0.	0.
James Murley Ft Lauderdale, FL 33301	Bd Mbr 1	0.	0.	0.
Elizabeth Plater-Zyberk Miami, FL 33135	Bd Mbr 1	0.	0.	0.
Hank Dittmar Las Vegas, NM 87701	Bd Mbr 1	0.	0.	0.
Total		0.	0.	0.

Form 990, Page 6, Part VIII

Relationship of Activities to the Accomplishment of Exempt Purposes Statement

Line Number ▼	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).
93b	Publications disseminate information about New Urbanism
93c	Contracts to conduct training, etc on New Urbanism

Form 990, Page 6, Part VIII

Continued

Relationship of Activities to the Accomplishment of Exempt Purposes Statement

Line Number ▼	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).
94	Membership enables individuals to participate in educational and other activities

Supporting Statement of:

Form 990 p 1/Line 20

Description	Amount
Prior period adjustments as follows:	
1999 contract revenue	30,000.
1999 Temp Restricted Grants Receivable	300,000.
1999 Accrued payroll adjustment	5,229.
1999 Accounts Payable	-3,872.
Total	<u>331,357.</u>

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

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).

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

Name of Exempt Organization: Congress for the New Urbanism
Employer Identification Number: 65-0483737
Address: The Hearst Building, 5 Third Street 725, San Francisco, CA 94103-3206

Check type of return to be filed:
[X] Form 990
[] Form 990-EZ
[] Form 990-T (Section 401(a) or 408(a) trust)
[] Form 1041-A
[] Form 5227
[] Form 8870
[] Form 990-BL
[] Form 990-PF
[] Form 990-T (trust other than above)
[] Form 4720
[] Form 6069

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

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 Nov 15, 20 01.
5 For calendar year 2000, or other tax year beginning ... and ending ...
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 ... We are currently undergoing a review of our financial statements and wish to await completion before filing. The return will be filed as expeditiously as possible.

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: [Signature] Title: Executive Director Date: 8/3/01

Notice to Applicant - To be Completed by the IRS

- [X] 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 due date of the return for which an extension was requested.
[] Other: _____

Director: _____ By: _____ Date: _____

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.

Name: Antoinette G. Nies, CPA
Address: 61 Prince Royal Drive, Corte Madera, CA 94925