

**Return of Organization Exempt from Income Tax**

**2001**

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

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 2001 calendar year, or tax year beginning , 2001, and ending**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See specific instructions	<b>C</b> Name of organization VIOLENCE POLICY CENTER		<b>D</b> Employer identification number 52-1571442
		Number street (or P.O. box if mail is not delivered to street addr) Room/suite 1140 19th Street, NW 600		<b>E</b> Telephone number (202) 822-8200
		City/Town or Country State ZIP code + 4 WASHINGTON DC 20036		<b>F</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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)		

**G Web site**

**J Organization type** (check only one):  501(c) 3 (insert no)  4947(a)(1) or  527

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

**L** Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12: **1,618,892**

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.)

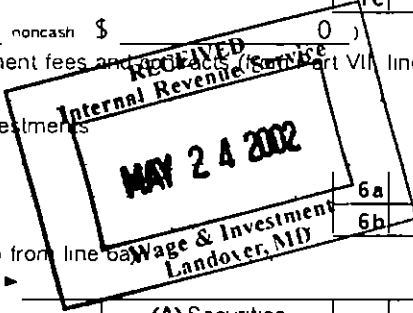
**H (d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I** Enter 4 digit group GEN: \_\_\_\_\_

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

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

<b>REVENUES</b>	1 Contributions, gifts, grants, and similar amounts received			
	a Direct public support	1a	1,326,782	
	b Indirect public support	1b	8,983	
	c Government contributions (grants)	1c		
	d Total (add lines 1a through 1c) (cash \$ 1,335,765 noncash \$ 0)	1d	1,335,765	
	2 Program service revenue including government fees and charges (Part VII, line 93)	2	260,647	
	3 Membership dues and assessments	3		
	4 Interest on savings and temporary cash investments	4	22,480	
	5 Dividends and interest from securities	5		
	6a Gross rents	6a		
	b Less rental expenses	6b		
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c		
7 Other investment income (describe _____)	7			
<b>EXPENSES</b>	8a Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
	b Less cost or other basis and sales expenses	8a		
	c Gain or (loss) (attach schedule)	8b		
	d Net gain or (loss) (combine line 8c, columns (A) and (B))	8c		
	8d			
	9 Special events and activities (attach schedule)			
	a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a		
	b Less direct expenses other than fundraising expenses	9b		
	c Net income 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 <b>Total revenue</b> (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	1,618,892		
<b>ASSETS</b>	13 Program services (from line 44, column (B))	13	1,381,054	
	14 Management and general (from line 44, column (C))	14	96,394	
	15 Fundraising (from line 44, column (D))	15	136,528	
	16 Payments to affiliates (attach schedule)	16		
	17 <b>Total expenses</b> (add lines 16 and 44, column (A))	17	1,613,976	
18 Excess or (deficit) for the year (subtract line 17 from line 12)	18	4,916		
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	917,368		
20 Other changes in net assets or fund balances (attach explanation)	20			
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	922,284		



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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 \$ _____)	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	116,177	92,941	11,618
26	Other salaries and wages	26	747,229	721,741	21,208
27	Pension plan contributions	27	23,853	20,252	1,717
28	Other employee benefits	28	48,528	41,200	3,494
29	Payroll taxes	29	58,504	49,670	4,212
30	Professional fundraising fees	30	2,400	0	0
31	Accounting fees	31	15,038	0	15,038
32	Legal fees	32			
33	Supplies	33	26,181	24,348	1,309
34	Telephone	34	32,773	27,824	2,360
35	Postage and shipping	35	22,087	20,541	1,104
36	Occupancy	36	193,356	164,159	13,922
37	Equipment rental and maintenance	37	8,312	7,057	598
38	Printing and publications	38	34,678	32,251	1,733
39	Travel	39	33,690	28,602	2,426
40	Conferences, conventions, and meetings	40	625	625	0
41	Interest	41			
42	Depreciation, depletion etc (attach schedule)	42	25,431	21,591	1,831
43	Other expenses not covered above (itemize)				
a	Dues and pubs	43a	15,414	11,986	3,428
b	Clipping service	43b	10,953	10,953	0
c	Research materials	43c	1,362	1,362	0
d	Special events	43d	103,257	20,638	0
e	See Other Expenses Stmt	43e	94,128	83,313	10,396
44	<b>Total functional expenses</b> (add lines 22-43) Organizations completing columns (B) (D) carry these totals to lines 13-15	44	1,613,976	1,381,054	96,394

**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? 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) & (4) organizations & section 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants & allocations to others)	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts but optional for others)
a The Violence Policy Center (VPC) conducts educational and research activities on firearms violence and related issues. VPC's ongoing educational efforts are targeted at the general public, policy makers, and the news media offering information and policy options that will be effective in reducing gun related death and injury. (Grants and allocations \$ 1,381,054 )	1,381,054
b _____ (Grants and allocations \$ _____ )	
c _____ (Grants and allocations \$ _____ )	
d _____ (Grants and allocations \$ _____ )	
e Other program services (Grants and allocations \$ _____ )	
<b>f Total of Program Service Expenses</b> (should equal line 44, column (B), program services)	1,381,054

**Part IV Balance Sheets** (See instructions)

Note		(A) Beginning of year		(B) End of year		
ASSETS	45	Cash – non interest bearing	5,760	45	70,443	
	46	Savings and temporary cash investments	840,087	46	803,561	
	47a	Accounts receivable		47a		
		b Less allowance for doubtful accounts		47b	47c	
	48a	Pledges receivable		48a		
		b Less allowance for doubtful accounts		48b	48c	
	49	Grants receivable		49		
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)		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	16,002	53	16,002	
	54	Investments – securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> 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	132,932	57a		
		b Less accumulated depreciation (attach schedule)	102,463	57b	57c	
	58	Other assets (describe <input type="checkbox"/> leasehold deposit )	52,316	58	30,469	
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)	15,275	59	15,275		
LIABILITIES	60	Accounts payable and accrued expenses	12,072	60	13,466	
	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 <input type="checkbox"/> )		65		
	66	<b>Total liabilities</b> (add lines 60 through 65)	12,072	66	13,466	
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	162,688	67	207,794	
	68	Temporarily restricted	754,680	68	714,490	
	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	<b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19 and column (B) must equal line 21)	917,368	73	922,284	
	74	<b>Total liabilities and net assets/fund balances</b> (add lines 66 and 73)	929,440	74	935,750	

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.

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**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**

<b>a</b>	Total revenue, gains, and other support per audited financial statements	<b>a</b>	1,618,892
<b>b</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>b</b>	
<b>c</b>	Line a minus line b	<b>c</b>	1,618,892
<b>d</b>	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)	<b>d</b>	
<b>e</b>	Total revenue per line 12, Form 990 (line c plus line d)	<b>e</b>	1,618,892

<b>a</b>	Total expenses and losses per audited financial statements	<b>a</b>	1,613,976
<b>b</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>b</b>	
<b>c</b>	Line a minus line b	<b>c</b>	1,613,976
<b>d</b>	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)	<b>d</b>	
<b>e</b>	Total expenses per line 17, Form 990 (line c plus line d)	<b>e</b>	1,613,976

**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
Josh Sugarmann Washington, DC 20036	Exec Director 40	116,177	3,485	0
Paul Lavrakas Washington, DC 20036	Board Chair 1	0	0	0
Natalie Roy Washington, DC 20036	Sec /Treasurer 1	0	0	0
Jack Blum Washington, DC 20005	Member 1	0	0	0
Andres Soto San Francisco, CA 94110	Member 1	0	0	0
Jonathan Cuneo Washington, DC 20002	Member 1	0	0	0
Sam Fields Ft Lauderdale, FL 33302	Member 1	0	0	0
Mark Karlin Chicago, IL 60661	Member 1	0	0	0
Marc Abraham Santa Monica, CA 90401	Member 1	0	0	0
Marcia Gillespie New York, NY 10005	Member 1	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)

		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	b 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
81a	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 direct or indirect political expenditures. See line 81 instructions	81a	0
81b	b 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
82b	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	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	b 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
84b	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85a	85 501(c)(4), (5) or (6) organizations a Were substantially all dues nondeductible by members?		
85b	b 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	c Dues, assessments, and similar amounts from members	85c	
85d	d Section 162(e) lobbying and political expenditures	85d	
85e	e Aggregate nondeductible amount of Section 6033(e)(1)(A) dues notices	85e	
85f	f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
85g	g Does the organization elect to pay the Section 6033(e) tax on the amount on line 85f?	85g	
85h	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	
86a	86 501(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	87 501(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	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
89a	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	89b	X
	c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under Sections 4912, 4955, and 4958 ▶ 0		0
	d Enter Amount of tax on line 89c, above, reimbursed by the organization ▶ 0		0
90a	90a List the states with which a copy of this return is filed ▶ District of Columbia		
90b	b Number of employees employed in the pay period that includes March 12, 2001 (see instructions)	90b	12
91	91 The books are in care of ▶ Violence Policy Center Telephone number ▶ (202) 822-8000 Located at ▶ 1140 19TH STREET, NW SUITE 600 DC ZIP + 4 ▶ 20036		
92	92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here and enter the amount of tax exempt interest received or accrued during the tax year ▶ 92		

**Part VII Analysis of Income-Producing Activities** (See 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 special events					259,730
b publication sales					917
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	22,480	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate					
a debt financed property					
b not debt financed property					
98 Net rental income or (loss) from 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))				22,480	260,647
105 Total (add line 104, columns (B), (D), and (E))					283,127

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)
▼	

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See instructions) N/A

(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)

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

Date 5/17/02

2c Dir

**Schedule A**  
(Form 990 or 990-EZ)

**Organization Exempt Under  
Section 501(c)(3)**

OMB No 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1)  
Nonexempt Charitable Trust Supplementary Information - (See separate instructions)

**2001**

Department of the Treasury  
Internal Revenue Service

Supplementary Information - (see separate instructions)

▶ Must be completed by the above organizations and attached to their Form 990 or 990-EZ

Name of the Organization

VIOLENCE POLICY CENTER

Employer identification Number

52-1571442

**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
KRISTEN RAND ----- WASHINGTON DC 20036	Dir of Federal Policy 40	116,177	3,485	0
JOSEPH SUDBAY ----- WASHINGTON DC 20036	Public Policy Director 40	97,917	2,712	0
MATHEW NOSANCHUK ----- WASHINGTON, DC 20036	Litigation Director 40	94,398	2,340	0
NAOMI SELIGMAN ----- WASHINGTON, DC 20036	Communications Director 40	73,917	2,217	0
FIONA F HARRIS ----- WASHINGTON DC 20036	Dir of Special Projects 40	73,917	2,217	0
Total number of other employees paid over \$50,000	▶ TWO			

**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
NONE -----		
-----		
-----		
-----		
-----		
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-----		
-----		
Total number of others receiving over \$50,000 for professional services	▶ NONE	

**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 <b>▶</b> \$ <u>34,397</u> <u>34,397</u> (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	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?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Pt V, Fm 990	X	
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc? (See Note below )		X
4 Do you have a section 403(b) annuity plan for your employees?	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 instructions)

The organization is not a private foundation because it is (please check only **One** applicable box)

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

Provide the following information about the supported organizations (See 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) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	1,227,487	992,236	571,828	512,050	3,303,601
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	210,920	214,302	48,750	5,713	479,685
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	43,322	23,369	10,778	9,025	86,494
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	1,481,729	1,229,907	631,356	526,788	3,869,780
24 Line 23 minus line 17	1,270,809	1,015,605	582,606	521,075	3,390,095
25 Enter 1% of line 23	14,817	12,299	6,314	5,268	
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a 67,802
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 1997 through 2000 exceeded the amount shown in line 26a Do not file this list with your return Enter the total of all these excess amounts					26b 2,306,158
c Total support for Section 509(a)(1) test Enter line 24, column (e)					26c 3,390,095
d Add Amounts from column (e) for lines	18 86,494	19	26b 2,306,158		26d 2,392,652
e Public support (line 26c minus line 26d total)	22				26e 997,443
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 29.42%
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	(2000)	(1999)	(1998)	(1997)	
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	(2000)	(1999)	(1998)	(1997)	
c Add Amounts from column (e) for lines	15	16			27c
	17	20	21		27d
d Add Line 27a total and line 27b total					27e
e Public support (line 27c total minus line 27d total)					27f
f Total support for section 509(a)(2) test Enter amount from line 23, column (e)					27g %
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27h %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, 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?		
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 ) ----- ----- -----		
32a	Does the organization maintain the following a Records indicating the racial composition of the student body, faculty, and administrative staff?		
32b	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
32c	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
32d	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 ) ----- -----		
33a	33 Does the organization discriminate by race in any way with respect to a Students' rights or privileges?		
33b	b Admissions policies?		
33c	c Employment of faculty or administrative staff?		
33d	d Scholarships or other financial assistance?		
33e	e Educational policies?		
33f	f Use of facilities?		
33g	g Athletic programs?		
33h	h Other extracurricular activities? If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement ) ----- ----- -----		
34a	34a Does the organization receive any financial aid or assistance from a governmental agency?		
34b	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	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 CB 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)

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		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term 'expenditures' means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	5,391
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	29,006
38	Total lobbying expenditures (add lines 36 and 37)	38	34,397
39	Other exempt purpose expenditures	39	1,579,579
40	Total exempt purpose expenditures (add lines 38 and 39)	40	1,613,976
41	Lobbying nontaxable amount. Enter the amount from the following table -		
	<b>If the amount on line 40 is -</b>		
	Not over \$500,000		
	Over \$500,000 but not over \$1,000,000		
	Over \$1,000,000 but not over \$1,500,000		
	Over \$1,500,000 but not over \$17,000,000		
	Over \$17,000,000		
	<b>The lobbying nontaxable amount is -</b>		
	20% of the amount on line 40		
	\$100,000 plus 15% of the excess over \$500,000		
	\$175,000 plus 10% of the excess over \$1,000,000		
	\$225,000 plus 5% of the excess over \$1,500,000		
	\$1,000,000		
41		41	230,699
42	Grassroots nontaxable amount (enter 25% of line 41)	42	57,675
43	Subtract line 42 from line 36. Enter 0 if line 42 is more than line 36	43	0
44	Subtract line 41 from line 38. Enter 0 if line 41 is more than line 38	44	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)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period					
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total	
45	Lobbying nontaxable amount	230,699	197,353	157,627	115,565	701,244
46	Lobbying ceiling amount (150% of line 45(e))					1,051,866
47	Total lobbying expenditures	34,397	30,607	22,259	21,877	109,140
48	Grassroots non-taxable amount	57,675	49,338	39,407	28,891	175,311
49	Grassroots ceiling amount (150% of line 48(e))					262,967
50	Grassroots lobbying expenditures	5,391	3,209	3,792	3,640	16,032

**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

- a Volunteers
- b Paid staff or management (include compensation in expenses reported on lines c through h)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (add lines c through h)

Yes	No	Amount

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



**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

Supplementary information for  
line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No 1545-0047

**2001**

Name of Organization

VIOLENCE POLICY CENTER

Employer Identification Number

52-1571442

Organization type (check one)

Filers of

Form 990 or 990 EZ

Section

- 501(c)( 3 ) (enter number) organization  
 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation  
 527 political organization

Form 990 PF

- 501(c)(3) exempt private foundation  
 4947(a)(1) nonexempt charitable trust treated as a private foundation  
 501(c)(3) taxable private foundation

Check if your organization is covered by the **general rule** or a **special rule** (Note Only a Section 501(c)(7), (8) or (10) organization can check box(es) for both the general rule and a special rule – see instructions )

**General Rule –**

- For organizations filing Form 990, 990 EZ, or 990 PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II )

**Special Rules –**

- For a Section 501(c)(3) organization filing Form 990, or Form 990 EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms (Complete Parts I and II )
- For a Section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990 EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals (Complete Parts I, II, and III )
- For a Section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990 EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000 (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose Do not complete any of the Parts unless the general rule applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year ) ▶ \$ \_\_\_\_\_

**Caution** Organizations that are not covered by the general rule and/or the special rules do not file Schedule B (Form 990 990 EZ or 990 PF) but **must** check the box in the heading of their Form 990 Form 990 EZ, or on line 1 of their Form 990-PF to certify that they do not meet the filing requirements of Schedule B (Form 990 990 EZ or 990 PF)

BAA

Schedule B (Form 990, 990 EZ or 990 PF) (2001)

Name of Organization

Employer Identification Number

VIOLENCE POLICY CENTER

52-1571442

**Part I** Contributors (see instructions)

(a) Number	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 500,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution )
(a) Number		(c) Aggregate contributions	(d) Type of contribution
2		\$ 400,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution )
(a) Number		(c) Aggregate contributions	(d) Type of contribution
3		\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution )
(a) Number		(c) Aggregate contributions	(d) Type of contribution
4		\$ 150,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution )
(a) Number		(c) Aggregate contributions	(d) Type of contribution
5		\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution )
(a) Number		(c) Aggregate contributions	(d) Type of contribution
6		\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution )

Name of Organization

Employer Identification Number

VIOLENCE POLICY CENTER

52-1571442

**Part I** Contributors (see instructions)

(a) Number	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		\$ 35,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution)
8		\$ 27,425	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution)
9		\$ 16,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution)
10		\$ 12,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution)
11		\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution)
12		\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution)

Name of Organization

Employer Identification Number

VIOLENCE POLICY CENTER

52-1571442

**Part I** Contributors (see instructions)

(a) Number	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13		\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution)

(a) Number	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
14		\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution)

(a) Number	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
15		\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution)

(a) Number	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution)

(a) Number	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution)

(a) Number	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is noncash contribution)

**VIOLENCE POLICY CENTER  
2001 DEPRECIATION SCHEDULE**

DESCRIPTION	DATE ACQ.	COST	LIFE	METHOD	12/00 ACC. DEP	2001 DEP EXP	12/01 ACC DEP	12/01 BOOK VALUE
FURNITURE	6/92	\$374	7YR	SL	\$374	\$0	\$374	\$0
FAX MACHINE	6/92	\$300	5YR	SL	\$300	\$0	\$300	\$0
XEROX COPIER	6/93	\$1,000	5YR	SL	\$1,000	\$0	\$1,000	\$0
HP 4L PRINTER	6/93	\$600	5YR	SL	\$600	\$0	\$600	\$0
COMPUTERS - 2	1/94	\$1,500	5YR	SL	\$1,500	\$0	\$1,500	\$0
GEM COMPUTER	7/94	\$1,673	5YR	SL	\$1,673	\$0	\$1,673	\$0
HP 4P PRINTER	9/94	\$1,349	5YR	SL	\$1,349	\$0	\$1,349	\$0
FURNITURE	9/94	\$620	7YR	SL	\$562	\$58	\$620	\$0
FURNITURE	10/94	\$786	7YR	SL	\$700	\$86	\$786	\$0
HP FAX MACHINE	1/95	\$800	5YR	SL	\$800	\$0	\$800	\$0
TAPE DRIVE	3/95	\$378	5YR	SL	\$378	\$0	\$378	\$0
CHAIRS - 2	6/95	\$495	7YR	SL	\$405	\$90	\$495	\$0
DELL COMP - 3	8/95	\$6,737	5YR	SL	\$6,737	\$0	\$6,737	\$0
BINDING MACHINE	9/95	\$545	5YR	SL	\$545	\$0	\$545	\$0
MINOLTA COPIER	10/95	\$10,000	5YR	SL	\$10,000	\$0	\$10,000	\$0
EQUIPMENT	2/96	\$408	5YR	SL	\$403	\$5	\$408	\$0
EQUIPMENT	2/96	\$503	5YR	SL	\$497	\$6	\$503	\$0
EQUIPMENT	3/96	\$1,500	5YR	SL	\$1,450	\$50	\$1,500	\$0
EQUIPMENT	11/96	\$592	5YR	SL	\$492	\$100	\$592	\$0
EQUIPMENT	12/96	\$1,356	5YR	SL	\$1,107	\$249	\$1,356	\$0
EQUIPMENT	12/96	\$2,779	5YR	SL	\$2,270	\$509	\$2,779	\$0
OPTIMA	1/97	\$442	5YR	SL	\$353	\$89	\$442	\$0
AMERICAN EXPRESS	2/97	\$2,147	5YR	SL	\$1,717	\$430	\$2,147	\$0
INTER TEL - PHONES	6/97	\$2,828	5YR	SL	\$2,263	\$565	\$2,828	\$0
TELCOA - PHONES	7/97	\$6,822	5YR	SL	\$4,776	\$1,365	\$6,140	\$682
COMPUTERS	7/97	\$11,235	5YR	SL	\$7,865	\$2,247	\$10,112	\$1,123
EQUIPMENT	10/97	\$1,013	5YR	SL	\$709	\$203	\$911	\$102
COMPUTER	11/97	\$2,538	5YR	SL	\$1,778	\$508	\$2,286	\$252
DELL COMPUTER	02/98	\$2,041	3YR	SL	\$1,927	\$114	\$2,041	\$0
DELL COMPUTER	08/98	\$2,327	3YR	SL	\$2,069	\$258	\$2,327	\$0
DELL COMPUTER	12/98	\$2,184	3YR	SL	\$1,517	\$667	\$2,184	\$0
HP PRINTER SOFTWARE	5/99	\$3,013	3YR	SL	\$1,423	\$1,005	\$2,428	\$585
DELL COMPUTERS	7/99	\$7,253	3YR	SL	\$3,627	\$2,418	\$6,045	\$1,208
ALARM SYSTEM	9/99	\$5,000	3YR	SL	\$2,223	\$1,667	\$3,890	\$1,110
FURNITURE	9/99	\$2,500	3YR	SL	\$1,042	\$834	\$1,876	\$624
COPIER	8/99	\$21,016	5YR	SL	\$5,254	\$4,203	\$9,457	\$11,559
CONF TABLE / CHAIRS	11/99	\$2,834	3YR	SL	\$1,103	\$946	\$2,049	\$785
FAX MACHINE	11/99	\$2,188	3YR	SL	\$790	\$729	\$1,519	\$669
3 DELL COMPUTERS	04/00	\$6,559	3YR	SL	\$1,639	\$1,639	\$3,279	\$3,281
COMPUTER	07/00	\$1,801	3YR	SL	\$300	\$600	\$900	\$901
NETWORKING EQUIP	07/00	\$8,000	3YR	SL	\$1,334	\$2,667	\$4,001	\$3,999
COMPUTER	08/00	\$1,313	3YR	SL	\$182	\$438	\$620	\$693
DELL COMPUTER	04/01	\$1,494	3YR	SL	\$0	\$374	\$374	\$1,120
FURNITURE	04/01	\$2,090	5YR	SL	\$0	\$314	\$314	\$1,776
<b>TOTALS</b>		<b>\$132,932</b>			<b>\$77,032</b>	<b>\$25,431</b>	<b>\$102,463</b>	<b>\$30,469</b>

# Application for Extension of Time to File an Exempt Organization Return

Department of the Treasury  
Internal Revenue Service

▶ File a separate application for each return

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

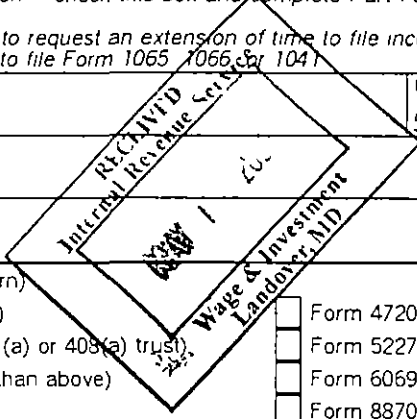
**Note** Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

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

**Note** Form 990-T corporations requesting an automatic 6 month extension — check this box and complete Part I only

All other corporations (including Form 990 C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print File by the due date for filing your return. See instructions	Name of Exempt Organization <b>VIOLENCE POLICY CENTER</b>	Employer Identification Number <b>52-1571442</b>
	Number, Street, and Room or Suite Number. If a P.O. Box, see instructions <b>1140 19th Street, NW, #600</b>	
	City, Town, or Post Office. For a foreign address, see instructions <b>WASHINGTON</b>	State ZIP Code <b>DC 20036</b>



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

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

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

1 I request an automatic 3 month (6 month for 990-T corporation) extension of time until Aug 15 20 02 to file the exempt organization return for the organization named above. The extension is for the organization's return for

- ▶  calendar year 20 01 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 \$ \_\_\_\_\_

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

c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ \_\_\_\_\_ 0

### Signature and Verification

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

Signature ▶ [Handwritten Signature] Title ▶ CPA Date ▶ 05/14/02

BAA For Paperwork Reduction Act Notice, see instructions

**Footnote 1: Public Support Statement**

**Violence Policy Center—EIN 52-1571442**

**Form 990—2001**

The Violence Policy Center (VPC) is a national 501(c)(3) educational foundation working to reduce firearms violence in America. The foundation of the VPC's approach is the recognition that firearms violence stems not solely from criminal use, but from the widespread marketing and distribution of an inherently dangerous consumer product of which specific categories—such as handguns and assault weapons—have very limited utility and inflict high costs on society in the form of premature death and debilitating injury. Through its research and public education activities, the VPC helps drive effective public policy while involving individuals and organizations from affected constituencies in efforts to reduce firearms violence.

In its work, the VPC satisfies the technical requirements of the facts and circumstances public support test of Regulation Section 1.170-9(e)(3) for the following reasons.

- Significantly more than 10 percent of the total support of the Violence Policy Center is eligible public support. This year the numerator of the VPC's support fraction is 29.42 percent.
- The Violence Policy Center maintains an active and bona fide program for the solicitation of funds from a range of public sources. Last year, the VPC conducted the following fundraising activities which were consistent with the size and scope of charitable purposes.

Worked with a fundraising consultant to continue expansion of our fundraising capabilities in the areas of major donor support, special event fundraising, and corporate support.

Staffed an outreach office to increase outreach ability to individual donors and coordinate special events for the organization.

Researched sources of corporate support.

Researched and cultivated new individual donors.

Conducted successful 2001 fundraising events and planned for 2002 events.

- The Violence Policy Center receives support from a representative number of sources. It does not receive significant funding from the members of a single family. The VPC received funding from six major foundations, numerous small family foundations, corporate contributions, as well as individual contributions from across America.
- The VPC's board of directors consists of a diverse membership from across the nation who bring to the organization a wide range of experience that can be applied to reducing gun death and injury in America
- The VPC publishes numerous studies which serve as educational materials that are widely available to the interested public. These materials are often disseminated by other organizations and circulated to their own networks. The VPC also maintains a frequently updated and continually expanding web page that offers a wide range of information to the public.
- The Violence Policy Center's work benefits members of the general public and the VPC draws upon the expertise of, and works with, individual members of the public who are experts on firearms violence and violence prevention issues, including researchers, attorneys, public officials, community leaders, service providers, academics, reporters, advocates, and victims of gun violence. The goal of the VPC is to help make the complex issues of firearms violence and violence prevention policy more easily understandable to a wide audience.
- The Violence Policy Center receives public support from the Combined Federal Campaign, a public charity.
- The Violence Policy Center's activities, virtually by definition, benefit a wide range of individuals sharing a common interest: increased safety and a reduction of gun death and injury. Accordingly, all Americans have a direct and tangible interest in its activities

Form 990, Page 2, Part II, Line 43

**Other Expenses Stmt**

Other expenses not covered above (itemize)	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Consultants	49,668	46,054	3,614	0
Commissary	2,761	2,344	199	218
Miscellaneous	1,426	1,426	0	0
Office insurance	2,550	2,165	184	201
Advertising	11,739	5,797	5,942	0
Bank charges	2,704	2,247	457	0
Video production	530	530	0	0
Licenses and fees	315	315	0	0
Press project	5,968	5,968	0	0
Press release distribution	16,467	16,467	0	0
<b>Total</b>	<u>94,128</u>	<u>83,313</u>	<u>10,396</u>	<u>419</u>