

Return of Organization Exempt From Income Tax

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

Department of the Treasury
Internal Revenue Service

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

A For the 2001 calendar year, or tax year period beginning and ending

B Check if applicable:

- Address change
- Name change
- Initial return
- Final return
- Amended return
- Application pending

C Name of organization: **AMERICAN INSTITUTE FOR SOCIAL JUSTICE, INC**

Number and street (or P O box if mail is not delivered to street address) Room/suite: **1024 ELYSIAN FIELDS AVE.**

City or town, state or country, and ZIP + 4: **NEW ORLEANS, LA 70117**

D Employer identification number: **23-7108110**

E Telephone number: **(504) 943-5954**

F Accounting method: Cash Accrual Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

H and **I** are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list)

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

I Enter 4-digit GEN ▶

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

G Web site ▶ **N/A**

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 8b, 8b, 9b, and 10b to line 12 ▶ **1,743,541.**

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

122 Revenue	1 Contributions, gifts, grants, and similar amounts received				
	a Direct public support	1a	1,573,224.		
	b Indirect public support	1b			
	c Government contributions (grants)	1c	100,000.		
	d Total (add lines 1a through 1c) (cash \$ 1,673,224. noncash \$ _____)	1d		1,673,224.	
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2		28,191.	
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4		130.	
	5 Dividends and interest from securities	5		125.	
	6 a Gross rents	6a			
	b Less, rental expenses	6b			
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7 Other revenue (describe ▶)					
8 a Gross amount from sale of assets other than inventory	(A) Securities	8a			
b Less cost of other basis and sales expenses	(B) Other	8b			
c Gain or (loss) (attach schedule)		8c			
d Net gain or (loss) (combine line 8c, columns (A) and (B))			8d		
9 Special events and activities (attach schedule)					
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				
10 a Gross sales of inventory, less returns and allowances	10a				
b Less cost of goods sold	10b				
c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c				
11 Other revenue (from Part VII, line 103)	11		41,871.		
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		1,743,541.		
Expenses	13 Program services (from line 44, column (B))	13	1,714,358.		
	14 Management and general (from line 44, column (C))	14	63,504.		
	15 Fundraising (from line 44, column (D))	15	31,177.		
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses (add lines 13 and 14, column (A))	17		1,809,039.	
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18		<65,498.>	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19		1,136,604.	
	20 Other changes in net assets or fund balances (attach explanation)	20		0.	
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		1,071,106.	

SCANNED FEB 14 2003

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

	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) cash \$1,126,208, noncash \$	22 1,126,208.	1,126,208.	STATEMENT 2	
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc.	25 0.	0.	0.	0.
26 Other salaries and wages	26 59,159.	32,503.	26,656.	
27 Pension plan contributions	27 2,958.	2,485.	251.	222.
28 Other employee benefits	28 5,386.	4,524.	458.	404.
29 Payroll taxes	29 6,617.	5,559.	562.	496.
30 Professional fundraising fees	30			
31 Accounting fees	31 91,741.	58,803.	27,688.	5,250.
32 Legal fees	32			
33 Supplies	33 9,137.	7,675.	777.	685.
34 Telephone	34 9,559.	8,029.	813.	717.
35 Postage and shipping	35 5,439.	4,569.	462.	408.
36 Occupancy	36 8,400.	7,056.	714.	630.
37 Equipment rental and maintenance	37 612.	514.	52.	46.
38 Printing and publications	38 5,047.	4,239.	429.	379.
39 Travel	39 11,713.	11,713.		
40 Conferences, conventions, and meetings	40			
41 Interest	41 53.		53.	
42 Depreciation, depletion, etc (attach schedule)	42 975.	819.	83.	73.
43 Other expenses not covered above (itemize):				
a	43a			
b	43b			
c	43c			
d	43d			
e SEE STATEMENT 1	43e 466,035.	439,662.	4,506.	21,867.
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 1,809,039.	1,714,358.	63,504.	31,177.

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? ▶

TO PROMOTE COMMUNITY ORGANIZATION AND LEADERSHIP DEVELOPMENT.

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)

a	AMOUNTS COLLECTED WERE UTILIZED TO ACTIVELY PROMOTE COMMUNITY ORGANIZATION AND LEADERSHIP DEVELOPMENT OF LOW TO MODERATE INCOME CITIZENS..	(Grants and allocations \$ 1,126,208.)	1,714,358.
b		(Grants and allocations \$)	
c		(Grants and allocations \$)	
d		(Grants and allocations \$)	
e	Other program services (attach schedule)	(Grants and allocations \$)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)		1,714,358.

Part IV Balance Sheets

Note		(A) Beginning of year		(B) End of year		
Where required, attached schedules and amounts within the description column should be for end-of-year amounts only						
Assets	45	Cash - non-interest-bearing	476,169.	45	458,649.	
	46	Savings and temporary cash investments		46		
	47 a	Accounts receivable	1,702,924.			
		b Less allowance for doubtful accounts	844,079.	927,583.	47c	858,845.
	48 a	Pledges receivable				
		b Less allowance for doubtful accounts			48c	
	49	Grants receivable	18,750.	49	122,084.	
	50	Receivables from officers, directors, trustees, and key employees		50		
	51 a	Other notes and loans receivable				
		b Less allowance for doubtful accounts			51c	
	52	Inventories for sale or use		52		
	53	Prepaid expenses and deferred charges	34,324.	53	12,026.	
	54	Investments - securities STMT 3	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	9,042.	54	8,174.
	55 a	Investments - land, buildings, and equipment basis				
		b Less: accumulated depreciation			55c	
56	Investments - other			56		
57 a	Land, buildings, and equipment basis	23,264.				
	b Less accumulated depreciation STMT 4	22,844.	1,395.	57c	420.	
58	Other assets (describe RENT DEPOSIT)		1,325.	58	1,325.	
59	Total assets (add lines 45 through 58) (must equal line 74)		1,468,588.	59	1,461,523.	
Liabilities	60	Accounts payable and accrued expenses	20,195.	60	58,362.	
	61	Grants payable	257,789.	61	278,055.	
	62	Deferred revenue		62		
	63	Loans from officers, directors, trustees, and key employees		63		
	64 a	Tax-exempt bond liabilities			64a	
		b Mortgages and other notes payable STMT 5		54,000.	64b	54,000.
	65	Other liabilities (describe)			65	0.
66	Total liabilities (add lines 60 through 65)		331,984.	66	390,417.	
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	1,055,444.	67	809,799.	
	68	Temporarily restricted	81,160.	68	261,307.	
	69	Permanently restricted		69		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74					
	70	Capital stock, trust principal, or current funds		70		
	71	Paid-in or capital surplus, or land, building, and equipment fund		71		
	72	Retained earnings, endowment, accumulated income, or other funds		72		
	73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)		1,136,604.	73	1,071,106.
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)		1,468,588.	74	1,461,523.

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

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return	Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return
<p>a Total revenue, gains, and other support per audited financial statements ▶ a 1,743,541.</p> <p>b Amounts included on line a but not on line 12, Form 990</p> <p>(1) Net unrealized gains on investments \$ _____</p> <p>(2) Donated services and use of facilities \$ _____</p> <p>(3) Recoveries of prior year grants \$ _____</p> <p>(4) Other (specify) \$ _____</p> <p>Add amounts on lines (1) through (4) ▶ b 0.</p> <p>c Line a minus line b ▶ c 1,743,541.</p> <p>d Amounts included on line 12, Form 990 but not on line a</p> <p>(1) Investment expenses not included on line 8b, Form 990 \$ _____</p> <p>(2) Other (specify) \$ _____</p> <p>Add amounts on lines (1) and (2) ▶ d 0.</p> <p>e Total revenue per line 12, Form 990 (line c plus line d) ▶ e 1,743,541.</p>	<p>a Total expenses and losses per audited financial statements ▶ a 1,809,039.</p> <p>b Amounts included on line a but not on line 17, Form 990</p> <p>(1) Donated services and use of facilities \$ _____</p> <p>(2) Prior year adjustments reported on line 20, Form 990 \$ _____</p> <p>(3) Losses reported on line 20, Form 990 \$ _____</p> <p>(4) Other (specify): \$ _____</p> <p>Add amounts on lines (1) through (4) ▶ b 0.</p> <p>c Line a minus line b ▶ c 1,809,039.</p> <p>d Amounts included on line 17, Form 990 but not on line a</p> <p>(1) Investment expenses not included on line 8b, Form 990 \$ _____</p> <p>(2) Other (specify): \$ _____</p> <p>Add amounts on lines (1) and (2) ▶ d 0.</p> <p>e Total expenses per line 17, Form 990 (line c plus line d) ▶ e 1,809,039.</p>

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated)				
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
LARRY RODGERS 816 S. DENISON ST. LITTLE ROCK, AR 72202	PRESIDENT/DIRECTOR 4HRS./WEEK	0.	0.	0.
PAT HOUSE 1009 S. ROCK STREET LITTLE ROCK, AR 72202	SECRETARY/DIRECTOR 4HRS./WEEK	0.	0.	0.
JAMES BUTLER 13510 BECKENHAM NORTH LITTLE ROCK, AR 72212	TREASURER/DIRECTOR 4HRS./WEEK	0.	0.	0.
JACK LAVY 501 N. BRYANT ST. LITTLE ROCK, AR 72205	DIRECTOR 2HRS./WEEK	0.	0.	0.
JAMES LYNCH # 16 LENON DRIVE LITTLE ROCK, AR 72207	DIRECTOR 2HRS./WEEK	0.	0.	0.
CAROLYN CARR 904 DEBERE DRIVE SILVER SPRINGS, MD 20903	EXECUTIVE DIRECTOR 4HRS./WEEK	0.	0.	0.
BARBARA FAHERTY 1024 ELYSIAN FIELDS AVENUE NEW ORLEANS, LA 70117	ASSISTANT TREASURER 4HRS./WEEK	0.	0.	0.
GODWIN NDUWKE 1024 ELYSIAN FIELDS AVENUE NEW ORLEANS, LA 70117	ASSISTANT SECRETARY 4HRS./WEEK	0.	0.	0.

25-20-01 (08/02)

AMERICAN INSTITUTE FOR SOCIAL JUSTICE, INC

Form 990 (2001)

23-7108110

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Part VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions	81a	0.
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b	
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	N/A
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85	501(c)(4), (5), or (6) organizations		
a	Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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	85b	N/A
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g	N/A
b	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?	85h	N/A
86	501(c)(7) organizations		
a	Enter initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations		
a	Gross income from members or shareholders	87a	N/A
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> 0., section 4912 <input type="checkbox"/> 0., section 4955 <input type="checkbox"/> 0.		
b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter amount of tax on line 89c, above, reimbursed by the organization		0.
90 a	List the states with which a copy of this return is filed <input type="checkbox"/> SEE STATEMENT 6		
b	Number of employees employed in the pay period that includes March 12, 2001	90b	3

91 The books are in care of BARBARA FAHERTY Telephone no 504-943-5954
 Located at 1024 ELYSIAN FIELDS AVE. ZIP + 4 70117

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
Note Enter gross amounts unless otherwise indicated					
93 Program service revenue.					
a TRAINING & CONSULTATION					28,112.
b PUBLICATIONS					79.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	130.	
96 Dividends and interest from securities			14	125.	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a INTEREST ON NOTES REC					38,723.
b MISCELLANEOUS					3,148.
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		255.	70,062.
105 Total (add line 104, columns (B), (D), and (E))					70,317.

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 Specific Instructions on page 32.)

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)
▼	SEE STATEMENT 7

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 33.)

- (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

Accompanying schedules and statements, and to the best of my knowledge and belief, it is true, information of which preparer has any knowledge

1/25/07 Gordon Q. Ndakwe/Asst Sec.

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

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

OMB No. 1545-0047

2001

Name of the organization **AMERICAN INSTITUTE FOR SOCIAL
JUSTICE, INC**

Employer identification number
23 7108110

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None".)

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE -----				

Total number of other employees paid over \$50,000 ▶	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None".)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
ACORN ----- 1024 ELYSIAN FIELDS AVE, NEW ORLEANS, LA 70117	PERSONNEL, PROJ. ADM, CONTRACTUAL	108,480.
CITIZEN'S CONSULTING, INC. ----- 1024 ELYSIAN FIELDS AVE, NEW ORLEANS, LA 70117	LEGAL, BOOKKEEPING, ADM	94,169.
DUPLANTIER, HRAPMANN, HOGAN & MAHER ----- 1340 POYDRAS ST., SUITE 2000, NEW ORLEANS, LA 70117	ACCOUNTING, AUDIT, MANAGEMENT ADVI	75,960.

Total number of others receiving over \$50,000 for professional services ▶	0	

Part III Statements About Activities (See page 2 of the instructions)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 35, Part VI-A, or line 1 of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities	1	X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions) SEE STATEMENT 8		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e Transfer of any part of its income or assets?	2e	X
3 Does the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below)	3	X
4 Do you have a section 403(b) annuity plan for your employees?	4	X
Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments SEE STATEMENT 9		

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box.)

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

Provide the following information about the supported organizations (See page 5 of the instructions)

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

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

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

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	1,460,898.	864,711.	521,633.	790,712.	3,637,954.
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	152,457.	198,945.	121,843.	95,554.	568,799.
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	373.		231.	225.	829.
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	1,613,728.	1,063,656.	643,707.	886,491.	4,207,582.
24 Line 23 minus line 17	1,461,271.	864,711.	521,864.	790,937.	3,638,783.
25 Enter 1% of line 23	16,137.	10,637.	6,437.	8,865.	

26 Organizations described on lines 10 or 11 a Enter 2% of amount in column (e), line 24

26a	72,776.
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 457,094.
c Total support for section 509(a)(1) test: Enter line 24, column (e)	26c 3,638,783.
d Add: Amounts from column (e) for lines: 18 829. 19 22 457,094.	26d 457,923.
e Public support (line 26c minus line 26d total)	26e 3,180,860.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))	26f 87.4155%

27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year N/A

(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 N/A	(2000)	(1999)	(1998)	(1997)
c Add: Amounts from column (e) for lines 15 17 20 21	27c N/A			
d Add: Line 27a total and line 27b total	27d N/A			
e Public support (line 27c total minus line 27d total)	27e N/A			
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)	27f N/A			
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))	27g N/A %			
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))	27h N/A %			

28 Unusual Grants For an organization described in line 10, 11, or 12, that received any unusual grants during 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.

NONE

AMERICAN INSTITUTE FOR SOCIAL JUSTICE, INC

Part V Private School Questionnaire (See page 7 of the instructions)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

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

32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
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 567, covering racial nondiscrimination? If "No," attach an explanation		

AMERICAN INSTITUTE FOR SOCIAL

Schedule A (Form 990 or 990-EZ) 2001 JUSTICE, INC

23-7108110 Page 5

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check a [] if the organization belongs to an affiliated group Check b [] if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures

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

(a) Affiliated group totals

(b) To be completed for ALL electing organizations

Table with columns for line numbers (36-44), (a) Affiliated group totals, and (b) To be completed for ALL electing organizations. Includes rows for Total lobbying expenditures, Total exempt purpose expenditures, and Lobbying nontaxable amount.

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

4-Year Averaging Period Under Section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period

N/A

Table with columns for Calendar year (or fiscal year beginning in), (a) 2001, (b) 2000, (c) 1999, (d) 1998, and (e) Total. Rows include Lobbying nontaxable amount, Lobbying ceiling amount, Total lobbying expenditures, Grassroots nontaxable amount, Grassroots ceiling amount, and 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 page 12 of the 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 e 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)

Table with columns for Yes, No, and Amount. Includes a total row at the bottom showing 0.

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

Exempt Organizations (See page 12 of the instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of

(i) Cash

(ii) Other assets

b Other transactions:

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

Yes/No table for section 51 with rows 51a(i), a(ii), b(i), b(ii), b(iii), b(iv), b(v), b(vi), and c.

Main table with columns (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, and (d) Description of transfers, transactions, and sharing arrangements. Rows include TRAVEL EXPENSES, LOANS RECEIVABLE, and PERSONNEL SERVICES.

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes No (X) No

b If "Yes," complete the following schedule

N/A

Schedule table with columns (a) Name of organization, (b) Type of organization, and (c) Description of relationship.

FORM 990 PAGE 2

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis - IRC, 179, Salvage	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
1	TI MATE 486 COMPUTER & MODEM	070293SL		5.00	16	3,015.			3,015.	3,015.		0.
2	APPLE COMPUTER	010393SL		5.00	16	3,240.			3,240.	3,240.		0.
3	MAC CLASSIC #1	100194SL		5.00	16	625.			625.	625.		0.
4	MAC CLASSIC #2	100194SL		5.00	16	625.			625.	625.		0.
5	MAC 635CD COMPUTER	053095200DE		5.00	17	790.			790.	790.		0.
6	DESKTOP COMPUTERS	090495200DE		5.00	17	1,772.			1,772.	1,772.		0.
7	XEROX COPIER CAPITAL LEASE	010195SL		7.00	17	5,875.			5,875.	4,616.		839.
8	TOSHIBA TELEPHONE SYSTEM CAPITAL LEASE	123195SL		5.00	17	4,958.			4,958.	4,958.		0.
9	MAC 635CD COMPUTER	050196200DE		5.00	17	2,364.			2,364.	2,228.		136.
	* TOTAL 990 PAGE 2 DEPR					23,264.		0.	23,264.	21,869.	0.	975.

(D) Asset disposed

FORM 990	OTHER EXPENSES			STATEMENT	1
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING	
BANK CHARGES	1,633.		1,633.		
CONTRACTUAL SERVICES	30,746.	30,746.			
INSURANCE	6,339.	6,339.			
ADMINISTRATIVE SERVICES	973.		973.		
PROGRAM	18,567.	18,567.			
RECRUITMENT AND ADVERTISING	1,230.	1,230.			
CAMPAIGN SERVICES	69,916.	69,916.			
OUTREACH SERVICES	2,500.	2,100.	212.	188.	
PERSONNEL SERVICES	227,436.	206,967.		20,469.	
PROJECT ADMINISTRATIVE SERVICES	1,197.	1,197.			
TAXES - ANNUAL FILINGS	730.	613.	62.	55.	
CORPORATE SERVICES	1,662.	1,396.	141.	125.	
BUS RENTAL	551.	463.	47.	41.	
EXPRESS SERVICES	5,008.	4,207.	426.	375.	
MANAGEMENT ADVISORY SERVICES	5,956.	5,003.	506.	447.	
PENALTIES	316.		316.		
EQUIPMENT PURCHASES	2,020.	1,696.	172.	152.	
TAXES- CORPORATE	205.	172.	18.	15.	
PROVISION FOR UNCOLLECTIBLE RECEIVABLES	88,956.	88,956.			
PUBLICATIONS	94.	94.			
TOTAL TO FM 990, LN 43	466,035.	439,662.	4,506.	21,867.	

FORM 990	CASH GRANTS AND ALLOCATIONS			STATEMENT	2
CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT	
COMMUNITY REINVESTMENT	ACORN(ASS.COMM.ORG FOR REFORM NOW)	1024 ELYSIAN FIELDS AVE., NEW ORLEANS, LA. 70117	NOT APPLICABLE-NON INDIVIDUAL	1119534.	
MANAGEMENT SERVICES	ACORN ASSOCIATES, INC.	1024 ELYSIAN FIELDS AVE., NEW ORLEANS, LA 70117	NOT APPLICABLE-NON INDIVIDUAL	100.	

MISCELLANEOUS	VARIOUS NON-AFFILIATED ORGANIZATION	NOT APPLICABLE- NON INDIVIDUAL	6,574.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22			<u>1126208.</u>

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 3

SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
EXXON MOBIL STOCK	8,174.				8,174.
TO 990, LN 54 COL B	8,174.				8,174.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 4

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
TI MATE 486 COMPUTER & MODEM	3,015.	3,015.	0.
APPLE COMPUTER	3,240.	3,240.	0.
MAC CLASSIC #1	625.	625.	0.
MAC CLASSIC #2	625.	625.	0.
MAC 635CD COMPUTER	790.	790.	0.
DESKTOP COMPUTERS	1,772.	1,772.	0.
XEROX COPIER CAPITAL LEASE	5,875.	5,455.	420.
TOSHIBA TELEPHONE SYSTEM CAPITAL LEASE	4,958.	4,958.	0.
MAC 635CD COMPUTER	2,364.	2,364.	0.
TOTAL TO FORM 990, PART IV, LN 57	23,264.	22,844.	420.

FORM 990

OTHER NOTES AND LOANS PAYABLE

STATEMENT 5

LENDER'S NAME TERMS OF REPAYMENT
 PROGRESSIVE AMERICA FUND, INC. FULL AMOUNT DUE ON MATURITY

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>
02/06/98	12/31/99	4,000.	.00%

SECURITY PROVIDED BY BORROWER PURPOSE OF LOAN
 NONE RESEARCH

RELATIONSHIP OF LENDER
 NONE

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>BALANCE DUE</u>
CASH	0.	4,000.

LENDER'S NAME TERMS OF REPAYMENT
 THE TIDES FOUNDATION \$16,666/YR FOR 3 YEARS

<u>DATE OF NOTE</u>	<u>MATURITY DATE</u>	<u>ORIGINAL LOAN AMOUNT</u>	<u>INTEREST RATE</u>
03/29/99	05/01/02	50,000.	.00%

SECURITY PROVIDED BY BORROWER PURPOSE OF LOAN
 NONE PURCHASE OF EQUIPMENT

RELATIONSHIP OF LENDER
 NONE

<u>DESCRIPTION OF CONSIDERATION</u>	<u>FMV OF CONSIDERATION</u>	<u>BALANCE DUE</u>
CASH	0.	50,000.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B	54,000.
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FORM 990 LIST OF STATES RECEIVING COPY OF RETURN STATEMENT 6
PART VI, LINE 90

STATES

AL, AR, AZ, CA, CT, FL, GA, IL, MA, MD, ME, MI, MN, NC, NJ, NM, NY, OH, OK, OR, OH, OK, PA, SC, TN, VA, WI, WV

FORM 990 PART VIII - RELATIONSHIP OF ACTIVITIES TO STATEMENT 7
ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
93A	FEEES COLLECTED FOR LEADERSHIP TRAINING PROGRAMS & PUBLICATIONS:
93B	THE ORGANIZATION'S PURPOSE INCLUDES LEADERSHIP TRAINING OF LOW-INCOME PERSONS TO EMPOWER THEM TO CHALLENGE VARIOUS GOVERNMENT ENTITIES SUCH AS SCHOOL BOARDS TO IMPROVE THEIR EFFECTIVENESS.
103A	ACCRUED INTEREST ON NOTES RECEIVABLE NOT HELD AS AN INVESTMENT; AD-
103B	VANCES TO FIVE NON-PROFIT ORGANIZATIONS, WHOSE ORGANIZATIONAL PURPOSE ADVANCES THIS ORGANIZATION'S PURPOSE-EMPOWERMENT OF THE DISADVANTAGED.

SCHEDULE A STATEMENT REGARDING ACTIVITIES WITH STATEMENT 8
SUBSTANTIAL CONTRIBUTORS, TRUSTEES, DIRECTORS, CREATORS, KEY EMPLOYEES, ETC.,
PART III, LINE 2

2(C) COPYING SERVICES- FIFTEENTH STREET CORPORATION	\$4,195
2(A) OFFICE LEASING- FIFTEENTH STREET CORPORATION	\$6,882

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS STATEMENT 9
PART III, LINE 4

THE BOARD OF DIRECTORS OR ITS DULY APPOINTED REPRESENTATIVES ARE RESPONSIBLE TO DETERMINE THAT ORGANIZATIONS RECEIVING GRANTS OR LOANS FROM IT DO QUALIFY TO RECEIVE PAYMENTS.

THE PAYMENTS ARE MADE ONLY TO ORGANIZATIONS THAT THE ENTITY IS FAMILIAR WITH THE REPUTATION, STRUCTURE AND BOARD MAKEUP OF THE ORGANIZATION SO THAT THE ENTITY CAN BE REASONABLY ASSURED THAT THE PAYMENTS ARE MADE ONLY TO QUALIFIED ORGANIZATIONS THAT WILL FURTHER THE CHARITABLE PURPOSE OF THE ENTITY. PAYMENTS ARE NOT MADE TO INDIVIDUALS.

4562

Form (Rev. March 2002) Department of the Treasury Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property) 990

See separate instructions. Attach to your tax return.

OMB No 1545-0172

2001

Attachment Sequence No 07

Name(s) shown on return

AMERICAN INSTITUTE FOR SOCIAL JUSTICE, INC

Business or activity to which this form relates

FORM 990 PAGE 2

Identifying number

23-7108110

Part I Election To Expense Certain Tangible Property Under Section 179 Note If you have any listed property, complete Part V before you complete Part I

Table with 5 columns: Line number, Description, and Amount. Includes lines 1-13 for Section 179 election details.

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

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

Table with 2 columns: Line number and Amount. Includes lines 14-16 for special depreciation allowance.

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

Section A

Table with 2 columns: Line number and Amount. Includes lines 17-18 for MACRS deductions.

Section B - Assets Placed in Service During 2001 Tax Year Using the General Depreciation System

Table with 7 columns: Classification of property, Month and year placed in service, Basis for depreciation, Recovery period, Convention, Method, and Depreciation deduction.

Section C - Assets Placed in Service During 2001 Tax Year Using the Alternative Depreciation System

Table with 6 columns: Line number, Class life, Month and year placed in service, Recovery period, Convention, Method, and Depreciation deduction.

Part IV Summary (See instructions)

Table with 2 columns: Line number and Amount. Includes lines 21-23 for summary of depreciation.

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

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

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

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
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25 Special depreciation allowance for listed property acquired after September 10, 2001, and used more than 50% in a qualified business use 25

26 Property used more than 50% in a qualified business use

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
		%						
		%						
		%						

27 Property used 50% or less in a qualified business use

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
		%				S/L -		
		%				S/L -		
		%				S/L -		

28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28

29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29

Section B - Information on Use of Vehicles

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

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

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

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

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

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
-----------------------------	---------------------------------	---------------------------	---------------------	--	-----------------------------------

42 Amortization of costs that begins during your 2001 tax year

(a)	(b)	(c)	(d)	(e)	(f)

43 Amortization of costs that began before your 2001 tax year 43

44 Total. Add amounts in column (f). See instructions for where to report 44