

Form 990

Department of the Treasury  
Internal Revenue Service

## Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2002

Open to Public  
Inspection

A For the 2002 calendar year, or tax year period beginning JUL 1, 2002 and ending JUN 30, 2003

B Check if  
applicable:

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

Please  
use IRS  
label or  
print or  
type.  
See  
Specific  
Instruc-  
tions.

C Name of organization

FOCUS PROJECT, INC.

Number and street (or P.O. box if mail is not delivered to street address)

1742 CONNECTICUT AVENUE, N.W.

City or town, state or country, and ZIP + 4

WASHINGTON, DC 20009

D Employer identification number

52-1302617

E Telephone number

202-234-8494

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 or-  
ganization 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: WWW.OMBWATCH.ORG

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

1,687,339.

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

Revenue	1	Contributions, gifts, grants, and similar amounts received:			
	a	Direct public support	1a	1,604,867.	
	b	Indirect public support	1b		
	c	Government contributions (grants)	1c		
	d	Total (add lines 1a through 1c) (cash \$ 1,604,867. noncash \$ )	1d	1,604,867.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	80,030.	
	3	Membership dues and assessments	3		
	4	Interest on savings and temporary cash investments	4	2,442.	
	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			
Revenue	8a	Gross amount from sale of assets other than inventory	(A) Securities	(B) Other	
	b	Less: cost or other basis and sales expenses	8a	270.	
	c	Gain or (loss) (attach schedule)	8c	<270.>	
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	STMT 1	<270.>
Revenue	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		
Revenue	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		
Revenue	11	Other revenue (from Part VII, line 103)	11		
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	1,687,069.	
Expenses	13	Program services (from line 44, column (B))	13	941,393.	
	14	Management and general (from line 44, column (C))	14	147,519.	
	15	Fundraising (from line 44, column (D))	15	48,523.	
	16	Payments to affiliates (attach schedule)	16		
	17	Total expenses (add lines 16 and 44, column (A))	17	1,137,435.	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	549,634.	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	254,731.	
	20	Other changes in net assets or fund balances (attach explanation)	20	SEE STATEMENT 2	2,084.
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	806,449.	

223001  
01-22-03

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2002)

1

10501215 793927 17061

2002.08000 FOCUS PROJECT, INC.

17061\_\_1

Application for Extension of Time To File an  
Exempt Organization Return

OMB No. 1545-1709

► 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 ☒ **X**
- 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	Name of Exempt Organization <b>FOCUS PROJECT., INC.</b>	Employer identification number <b>52-1302617</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>1742 CONNECTICUT AVENUE, N.W.</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>WASHINGTON, DC 20009</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 (sec. 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 **FEBRUARY 17, 2004** to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
► ☐ calendar year \_\_\_\_\_ or  
► ☒ tax year beginning **JUL 1, 2002**, and ending **JUN 30, 2003**

- 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 \$ \_\_\_\_\_ N/A

**Signature and Verification**

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

Signature ► *David Stern* Title ► *CEO* Date ► *11/10/03*

LHA For Paperwork Reduction Act Notice, see instruction

Form 8868 (12-2000)

**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. Page 2

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) ..... cash \$ 24,200. noncash \$	22 24,200.	24,200.	STATEMENT 5	
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 79,413.	67,501.		7,941.
26 Other salaries and wages .....	26 485,532.	395,867.	74,243.	15,422.
27 Pension plan contributions .....	27 27,874.	22,859.	3,862.	1,153.
28 Other employee benefits .....	28 87,473.	71,619.	12,208.	3,646.
29 Payroll taxes .....	29 44,778.	36,648.	6,260.	1,870.
30 Professional fundraising fees .....	30			
31 Accounting fees .....	31 12,160.	10,238.	1,480.	442.
32 Legal fees .....	32 281.	281.		
33 Supplies .....	33 6,469.	5,364.	851.	254.
34 Telephone .....	34 6,843.	5,626.	937.	280.
35 Postage and shipping .....	35 4,893.	3,956.	721.	216.
36 Occupancy .....	36 101,618.	83,788.	13,729.	4,101.
37 Equipment rental and maintenance .....	37 4,504.	3,727.	598.	179.
38 Printing and publications .....	38 17,971.	11,030.	5,345.	1,596.
39 Travel .....	39 10,714.	9,139.	1,207.	368.
40 Conferences, conventions, and meetings .....	40 9,030.	8,337.	693.	
41 Interest .....	41			
42 Depreciation, depletion, etc. (attach schedule) ...	42 38,896.	31,903.	5,384.	1,609.
43 Other expenses not covered above (itemize):				
a	43a			
b	43b			
c	43c			
d	43d			
e SEE STATEMENT 3	43e 174,786.	149,310.	16,030.	9,446.
44 Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 1,137,435.	941,393.	147,519.	48,523.

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? ☐ SEE STATEMENT 4

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 FEDERAL BUDGET-CONDUCT WORKSHOPS AND ANALYSIS THAT EDUCATE THE PUBLIC ON BUDGETARY MATTERS AND REGULATIONS BEING CONSIDERED BY THE FEDERAL GOVERNMENT (Grants and allocations \$ )	229,397.
b REGULATORY-IMPROVING ACCESS TO OUR GOVERNMENT POLICY MAKERS AND ENGERGIZING CITIZEN PARTICIPATION TO LEAD TO A MORE JUST, EQUITABLE AND ACCOUNTABLE GOVERNMENT THAT WILL STRENGTHEN OUR CIVIL SOCIETY. (Grants and allocations \$ )	146,246.
c INFORMATION POLICY: TO BE AN IMPORTANT RESOURCE TO THE NEWS MEDIA BY BEING A SPOKESPERSON ON SUBSTANTIVE AREAS AND PROVIDE BACKGROUND EXPERTISE ON MAJOR PUBLIC ISSUES. (Grants and allocations \$ )	259,475.
d NONPROFIT ADVOCACY-TO CONDUCT MEETINGS AROUND THE COUNTRY ON ORGANIZED BY STATE AND LOCAL GROUPS ON VARIOUS ISSUES. (Grants and allocations \$ )	306,275.
e Other program services (attach schedule) (Grants and allocations \$ )	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	941,393.

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01-22-03

Form 990 (2002)

**Part IV Balance Sheets**

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
<b>Assets</b>	45 Cash - non-interest-bearing	75,752.	45	234,035.
	46 Savings and temporary cash investments	99,996.	46	101,913.
	47 a Accounts receivable	23,080.		
	b Less: allowance for doubtful accounts		47c	23,080.
	48 a Pledges receivable		48a	
	b Less: allowance for doubtful accounts		48b	
	49 Grants receivable		49	435,000.
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable		51a	
	b Less: allowance for doubtful accounts		51b	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	12,606.	53	7,705.
	54 Investments - securities STMT 6 <input checked="" type="checkbox"/> Cost <input type="checkbox"/> FMV	573.	54	2,657.
	55 a Investments - land, buildings, and equipment: basis		55a	
	b Less: accumulated depreciation		55b	
56 Investments - other		56		
57 a Land, buildings, and equipment: basis	162,789.	57a		
b Less: accumulated depreciation STMT 7	114,959.	57b		
58 Other assets (describe )	83,780.	57c	47,830.	
59 <b>Total assets</b> (add lines 45 through 58) (must equal line 74)	302,515.	59	852,220.	
<b>Liabilities</b>	60 Accounts payable and accrued expenses	32,201.	60	35,855.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable STMT 8	15,583.	64b	9,916.
	65 Other liabilities (describe )		65	
66 <b>Total liabilities</b> (add lines 60 through 65)	47,784.	66	45,771.	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	194,731.	67	310,013.
	68 Temporarily restricted	60,000.	68	496,436.
	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; column (B) must equal line 21)	254,731.	73	806,449.
	74 <b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	302,515.	74	852,220.

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 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? N/A	78b	
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 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 N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b	
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g	
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? N/A	85h	
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0.; section 4912 0.; section 4955 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 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 NONE		
b	Number of employees employed in the pay period that includes March 12, 2002 90b 15		
91	The books are in care of O'CONNOR AND DESMARIAS Telephone no. 202-234-8494		
	Located at 6720 CURRAN STREET MCLEAN, VA ZIP + 4 22101		
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 page 31 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a PUBLICATIONS					5,725.
b TECHNICAL ASSISTANCE					19,025.
c EXPENSE REIMBURSEMENTS					55,280.
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	2,442.	
96 Dividends and 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 personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					<270.>
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))		0.		2,442.	79,760.
105 Total (add line 104, columns (B), (D), and (E))					82,202.

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

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See page 32 of the instructions.)

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 12

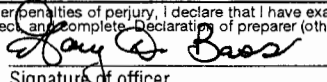

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 32 of the instructions.)

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

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 33 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

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

Please Sign Here	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.			
	Signature of officer 	Date 12/24/03	Type or print name and title GARY D. BASS, EXECUTIVE DIRECTOR	
Paid Preparer's Use Only	Preparer's signature 	Date 12/15/03	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN 214-80-8602
	Firm's name (or yours if self-employed), address, and ZIP + 4 RIBIS, JONES & MARESCA, P.A. 10500 LITTLE PATUXENT PARKWAY, SUITE 770 COLUMBIA, MD 21044	EIN 52-1853933	Phone no. 410-884-0220	

Form 990 (2002)

SCHEDULE A  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.)  
▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No. 1545-0047

2002

Name of the organization  
FOCUS PROJECT, INC.

Employer identification number  
52 1302617

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
KAY GUINANE 1742 CONN AVE, NW WASHINGTON DC 2000940	MANAGER	51,151.	2,238.	
Total number of other employees paid over \$50,000 ▶		0		

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

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

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

Yes No

- 1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities: \$ 52,877. (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

1 X

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.

- 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

a Sale, exchange, or leasing of property?

2a

X

b Lending of money or other extension of credit?

2b

X

c Furnishing of goods, services, or facilities?

2c

X

d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V, FORM 990

2d

X

e Transfer of any part of its income or assets?

2e

X

- 3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)

3

X

- 4 Do you have a section 403(b) annuity plan for your employees?

4

X

Note: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.

**Part IV** Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions.)

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

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

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 5 of the instructions.)

Schedule A (Form 990 or 990-EZ) 2002

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

Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	868,300.	896,142.	1,270,206.	913,995.	3,948,643.
16 Membership fees received			1,380.	1,945.	3,325.
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	48,954.	150,638.	184,211.	74,521.	458,324.
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	3,514.	5,900.	4,669.	4,698.	18,781.
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		26,250.	SEE STATEMENT 13		26,250.
23 Total of lines 15 through 22	920,768.	1,078,930.	1,460,466.	995,159.	4,455,323.
24 Line 23 minus line 17	871,814.	928,292.	1,276,255.	920,638.	3,996,999.
25 Enter 1% of line 23	9,208.	10,789.	14,605.	9,952.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					79,940.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the sum of all these excess amounts					1,941,258.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					3,996,999.
d Add: Amounts from column (e) for lines: 18 18,781. 19 1,941,258. 22 26,250. 26b					1,986,289.
e Public support (line 26c minus line 26d total)					2,010,710.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					50.3055%
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 (2001) (2000) (1999) (1998)					
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 (2001) (2000) (1999) (1998)					
c Add: Amounts from column (e) for lines: 15 16 17 20 21					N/A
d Add: Line 27a total and line 27b total					N/A
e Public support (line 27c total minus line 27d total)					N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					N/A %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

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

N/A

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

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? .....	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? ..... If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)	31	
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff? .....	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions? ..... If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	32d	
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges? .....	33a	
b Admissions policies? .....	33b	
c Employment of faculty or administrative staff? .....	33c	
d Scholarships or other financial assistance? .....	33d	
e Educational policies? .....	33e	
f Use of facilities? .....	33f	
g Athletic programs? .....	33g	
h Other extracurricular activities? .....	33h	
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? .....	34a	
b Has the organization's right to such aid ever been revoked or suspended? .....	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation .....	35	

Schedule A (Form 990 or 990-EZ) 2002

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.) (To be completed ONLY by an eligible organization that filed Form 5768)

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	16,114.
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	36,763.
38	Total lobbying expenditures (add lines 36 and 37)	38	52,877.
39	Other exempt purpose expenditures	39	1,078,978.
40	Total exempt purpose expenditures (add lines 38 and 39)	40	1,131,855.
41 Lobbying nontaxable amount. Enter the amount from the following table -			
If the amount on line 40 is -		The lobbying nontaxable amount is -	
Not over \$500,000		20% of the amount on line 40	
Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000	
Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000	
Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000	
Over \$17,000,000		\$1,000,000	
41		41	188,186.
42	Grassroots nontaxable amount (enter 25% of line 41)	42	47,047.
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 on page 11 of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45 Lobbying nontaxable amount	188,186.	194,676.	178,134.	182,418.	743,414.
46 Lobbying ceiling amount (150% of line 45(e))					1,115,121.
47 Total lobbying expenditures	52,877.	46,566.	30,004.	25,554.	155,001.
48 Grassroots nontaxable amount	47,047.	48,669.	44,534.	45,605.	185,855.
49 Grassroots ceiling amount (150% of line 48(e))					278,783.
50 Grassroots lobbying expenditures	16,114.	9,686.	7,582.	3,786.	37,168.

Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)		N/A		
During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:		Yes	No	Amount
a	Volunteers			
b	Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c	Media advertisements			
d	Mailings to members, legislators, or the public			
e	Publications, or published or broadcast statements			
f	Grants to other organizations for lobbying purposes			
g	Direct contact with legislators, their staffs, government officials, or a legislative body			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i	Total lobbying expenditures (Add lines c through h.)			0.

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

2002

Name of organization: FOCUS PROJECT, INC.
Employer identification number: 52-1302617

Organization type (check one):

- Filers of: Section:
Form 990 or 990-EZ [X] 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-

- [X] 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 they 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).

Name of organization

Employer identification number

FOCUS PROJECT, INC.

52-1302617

**Part I** Contributors (See Specific Instructions.)

(a)	(c) Aggregate contributions	(d) Type of contribution
	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	(c) Aggregate contributions	(d) Type of contribution
	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	(c) Aggregate contributions	(d) Type of contribution
	\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	(c) Aggregate contributions	(d) Type of contribution
	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	(c) Aggregate contributions	(d) Type of contribution
	150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	(c) Aggregate contributions	(d) Type of contribution
	160,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2002)

0501215 793927 17061

14  
2002.08000 FOCUS PROJECT, INC.

17061\_1

Name of organization

Employer identification number

FOCUS PROJECT, INC.

52-1302617

**Part I Contributors** (See Specific Instructions.)

(c) Aggregate contributions	(d) Type of contribution
\$ 190,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(c) Aggregate contributions	(d) Type of contribution
\$ 125,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(c) Aggregate contributions	(d) Type of contribution
\$ 45,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
(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 a noncash contribution.)
(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 a noncash contribution.)
(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 a noncash contribution.)

223452 01-23-03

10501215 793927 17061

15

2002.08000 FOCUS PROJECT, INC.

Schedule B (Form 990, 990-EZ, or 990-PF) (2002)

17061\_\_1

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
42	SPEAKER PHONE	083002SL		5.00	16	991.			991.			165.
	COMPUTER EQUIPMENT											
6	VIDEO PROJECTOR	120197SL		7.00	16	3,724.			3,724.	2,393.		532.
11	(D) POSTAGE MACHINE	111798SL		5.00	16	2,695.			2,695.	1,954.		471.
13	FILE SERVER	060399SL		5.00	16	1,450.			1,450.	906.		290.
14	COMPUTER EQUIPMENT	063000SL		5.00	16	50,415.			50,415.	21,426.		10,083.
15	COMPUTER EQUIPMENT	051600SL		5.00	16	1,518.			1,518.	645.		304.
16	ACER TRAVEL MATE 340T	051600SL		5.00	16	1,788.			1,788.	760.		358.
17	COMPUTER EQUIPMENT	151600SL		5.00	16	893.			893.	380.		179.
18	SONY MULTISCAN NOVEL NETWORKS	051600SL		5.00	16	770.			770.	327.		154.
19	BAYSTACK EQUIPMENT	063000SL		5.00	16	4,580.			4,580.	1,947.		916.
21	HP LASER JET PRINTER	102899SL		5.00	16	1,524.			1,524.	800.		305.
22	TTF FAX MACHINE	111599SL		5.00	16	1,014.			1,014.	533.		203.
23	COMPUTER	080100SL		5.00	16	1,422.			1,422.	707.		284.
24	DELL POWERVAULT 21XS	092800SL		3.00	16	8,357.			8,357.	4,179.		2,786.
25	DELL POWEREDGE 6450	092800SL		3.00	16	18,771.			18,771.	9,386.		6,257.
26	DELL COMPUTER EQUIPMENT	092800SL		3.00	16	1,235.			1,235.	618.		412.
27	SMART UPS 2000 COMPUTER EQUIPMENT	121000SL		3.00	16	1,260.			1,260.	630.		420.

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
28	MILLENNIA MAX GS133 COMPUTER	022201SL		3.00	16	1,200.			1,200.	600.		400.
29	MILLENNIA MAX GS 133 COMPUTER	022201SL		3.00	16	1,178.			1,178.	589.		393.
30	PANASONIC VIDEO CAMERA	022201SL		5.00	16	1,410.			1,410.	423.		282.
31	COPIER	061101SL		5.00	16	15,999.			15,999.	4,800.		3,200.
32	HP 144 GB COMPUTER EQUIPMENT	011201SL		3.00	16	2,489.			2,489.	1,245.		830.
33	COMPUTER EQUIPMENT	090100SL		3.00	16	1,242.			1,242.	621.		414.
38	EQUIPMENT	063000SL		5.00	16	7,028.			7,028.	2,987.		1,406.
39	DELL COMPUTER EQUIPMENT	030102SL		3.00	16	2,259.			2,259.	251.		753.
40	COMPUTER	100202SL		3.00	16	1,124.			1,124.			281.
41	POSTAGE MACHINE	080102SL		5.00	16	1,100.			1,100.			202.
	* 990 PAGE 2 TOTAL - COMPUTER EQUIPMENT					136,445.		0.	136,445.	59,107.	0.	32,115.
35	INFORMIX SOFTWARE	120100SL		3.00	16	3,888.			3,888.	1,944.		1,296.
36	LINUX 9.21	011201SL		3.00	16	1,300.			1,300.	650.		433.
37	WATCHGUARD FIREBOX SOFTWARE	072500SL		3.00	16	5,080.			5,080.	2,540.		1,626.
	* 990 PAGE 2 TOTAL - COMPUTER EQUIPMENT					10,268.		0.	10,268.	5,134.	0.	3,355.
10	LEASEHOLD IMPROVEMENT	091698SL		2.00	16	8,000.			8,000.	8,000.		0.
34	LEASEHOLD IMPROVEMENT	080100SL		3.00	16	9,780.			9,780.	6,248.		3,260.
	* 990 PAGE 2 TOTAL - COMPUTER EQUIPMENT					17,780.		0.	17,780.	14,248.	0.	3,260.



FORM 990                      GAIN (LOSS) FROM SALE OF OTHER ASSETS                      STATEMENT      1

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
POSTAGE MACHINE	11/17/98	04/15/03	PURCHASED	
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC
	0.	2,695.	0.	2,425.
TO FM 990, PART I, LN 8		2,695.	0.	2,425.

NET GAIN  
OR (LOSS)

<270.>

<270.>

FORM 990                      OTHER CHANGES IN NET ASSETS OR FUND BALANCES                      STATEMENT      2

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENT	2,084.
TOTAL TO FORM 990, PART I, LINE 20	2,084.

FORM 990                      OTHER EXPENSES                      STATEMENT      3

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
CONSULTING FEES	100,695.	92,744.	0.	7,951.
COMPUTER/EMAIL	4,365.	3,791.	442.	132.
MISCELLANEOUS	4,980.	3,487.	1,150.	343.
BANK CHARGES	508.		508.	
INSURANCE-OFFICE	5,122.	4,249.	672.	201.
WEBSITE AND COMPUTER	34,560.	33,732.	638.	190.
TECHNOLOGY BUDGET	12,633.	9,900.	2,104.	629.
DEVELOPMENT	1,695.	1,407.	288.	
BAD DEBT EXPENSE	10,228.		10,228.	
TOTAL TO FM 990, LN 43	174,786.	149,310.	16,030.	9,446.

FORM 990      STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE      STATEMENT      4  
PART III

EXPLANATION

TO IMPROVE ACCESS TO OUR GOVERNMENTAL DECISION-MAKERS AND ENERGIZE CITIZEN PARTICIPATION IN ORDER TO FORM AN EQUITABLE AND ACCOUNTABLE GOVERNMENT.

FORM 990      CASH GRANTS AND ALLOCATIONS      STATEMENT      5

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
FEDERAL BUDGET	US ACTION	341 G ST. WASHINGTON, D.C.	NONE	5,000.
FEDERAL BUDGET	URBAN INSTITUTE	2100 M STREET, WASHINGTON D.C.	NONE	15,000.
CONTRIBUTION	ACORN	739 8TH STREET, SE WASHINGTON, DC 20003	NONE	3,000.
CONTRIBUTION	NAT CMTE FOR RSPNSIVE PHILANTHROPY	2001 S STREET, N.W. SUITE 620 WASHINGTON, D.C.	NONE	1,200.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				24,200.

FORM 990      NON-GOVERNMENT SECURITIES      STATEMENT      6

SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
INVESTMENTS	2,657.				2,657.
TO 990, LN 54 COL B	2,657.				2,657.

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FORM 990      DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT      STATEMENT      7

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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
VIDEO PROJECTOR	3,724.	2,925.	799.
LEASEHOLD IMPROVEMENT	8,000.	8,000.	0.
FILE SERVER	1,450.	1,196.	254.
COMPUTER EQUIPMENT	50,415.	31,509.	18,906.
COMPUTER EQUIPMENT	1,518.	949.	569.
ACER TRAVEL MATE 340T	1,788.	1,118.	670.
COMPUTER EQUIPMENT	893.	559.	334.
SONY MULTISCAN	770.	481.	289.
NORTEL NETWORKS BAYSTACK EQUIPMENT	4,580.	2,863.	1,717.
HP LASER JET PRINTER	1,524.	1,105.	419.
JTF FAX MACHINE	1,014.	736.	278.
COMPUTER	1,422.	991.	431.
DELL POWERSHIELD 21XS	8,357.	6,965.	1,392.
DELL POWEREDGE 6450	18,771.	15,643.	3,128.
DELL COMPUTER EQUIPMENT	1,235.	1,030.	205.
SMART UPS 2000 COMPUTER EQUIPMENT	1,260.	1,050.	210.
MILLENNIA MAX GS133 COMPUTER	1,200.	1,000.	200.
MILLENNIA MAX GS 133 COMPUTER	1,178.	982.	196.
PANASONIC VIDEO CAMERA	1,410.	705.	705.
COPIER	15,999.	8,000.	7,999.
HP 144 GB COMPUTER EQUIPMENT	2,489.	2,075.	414.
COMPUTER EQUIPMENT	1,242.	1,035.	207.
LEASEHOLD IMPROVEMENT	9,780.	9,508.	272.
INFORMIX SOFTWARE	3,888.	3,240.	648.
LINUX 9.21	1,300.	1,083.	217.
WATCHGUARD FIREBOX SOFTWARE	5,080.	4,166.	914.
EQUIPMENT	7,028.	4,393.	2,635.
DELL COMPUTER EQUIPMENT	2,259.	1,004.	1,255.
COMPUTER	1,124.	281.	843.
POSTAGE MACHINE	1,100.	202.	898.
SPEAKER PHONE	991.	165.	826.
TOTAL TO FORM 990, PART IV, LN 57	162,789.	114,959.	47,830.

FORM 990	OTHER NOTES AND LOANS PAYABLE	STATEMENT	8
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LENDER'S NAME	TERMS OF REPAYMENT
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THE BAUMAN FOUNDATION

DATE OF NOTE	MATURITY DATE	ORIGINAL LOAN AMOUNT	INTEREST RATE
07/03/01	07/03/04	17,000.	.00%

SECURITY PROVIDED BY BORROWER	PURPOSE OF LOAN
NONE	PURCHASE OF NEW COPIER

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION	FMV OF CONSIDERATION	BALANCE DUE
	0.	9,916.
TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B		9,916.

FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT	9
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DESCRIPTION	AMOUNT
LOSS ON SALE OF ASSET	270.
TOTAL TO FORM 990, PART IV-B	270.

FORM 990	OTHER REVENUE INCLUDED ON FORM 990	STATEMENT	10
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DESCRIPTION	AMOUNT
LOSS ON SALE OF ASSET	<270.>
TOTAL TO FORM 990, PART IV-A	<270.>

FORM 990

PART V - LIST OF OFFICERS, DIRECTORS,  
TRUSTEES AND KEY EMPLOYEES

STATEMENT 11

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN EXPENSE CONTRIB ACCOUNT	
GARY D BASS 1742 CONNECTICUT AVE NW WASHINGTON DC 20009	EXECUTIVE DIRECTOR 40	79,413.	3,971.	0.
NANCY AMIDEI 1742 CONNECTICUT AVE NW WASHINGTON DC 20009	VICE-CHAIR 2	0.	0.	0.
RICHARD HEALEY 1742 CONNECTICUT AVE NW WASHINGTON DC 20009	BOARD MEMBER 2	0.	0.	0.
KRISTINE JACOBS 1742 CONNECTICUT AVE NW WASHINGTON DC 20009	BOARD MEMBER 2	0.	0.	0.
BOB LAWRENCE 1742 CONNECTICUT AVE NW WASHINGTON DC 20009	TREASURER 2	0.	0.	0.
MARK LLOYD 1742 CONNECTICUT AVE NW WASHINGTON DC 20009	BOARD MEMBER 2	0.	0.	0.
PAUL MARCHAND 1742 CONNECTICUT AVE NW WASHINGTON DC 20009	BOARD MEMBER 2	0.	0.	0.
ELLEN MILLER 1742 CONNECTICUT AVE NW WASHINGTON DC 20009	BOARD MEMBER 2	0.	0.	0.
DAVID RICE 1742 CONNECTICUT AVE NW WASHINGTON DC 20009	BOARD MEMBER 2	0.	0.	0.
MARK ROSENMAN 1742 CONNECTICUT AVE NW WASHINGTON DC 20009	CHAIR 2	0.	0.	0.
MARGARET SEMINARIO 1742 CONNECTICUT AVE NW WASHINGTON DC 20009	BOARD MEMBER 2	0.	0.	0.

FOCUS PROJECT, INC.		52-1302617		
BARBARA SOMSON 1742 CONNECTICUT AVE NW WASHINGTON DC 20009	BOARD MEMBER 2	0.	0.	0.
JIM WEILL 1742 CONNECTICUT AVE NW WASHINGTON DC 20009	BOARD MEMBER 2	0.	0.	0.
BARBARA CHOW 1742 CONNECTICUT AVE NW WASHINGTON DC 20036	BOARD MEMBER 2	0.	0.	0.
LYNN GOLDMAN 1742 CONNECTICUT AVE NW WASHINGTON DC 20009	BOARD MEMBER 2	0.	0.	0.
ED JAYNE 1742 CONNECTICUT AVE NW WASHINGTON DC 20009	BOARD MEMBER 2	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		79,413.	3,971.	0.

FORM 990	PART VIII - RELATIONSHIP OF ACTIVITIES TO ACCOMPLISHMENT OF EXEMPT PURPOSES	STATEMENT 12
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LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
93A	INFORMATION DISTRIBUTION TO PUBLIC CONCERNING EXECUTIVE BRANCH, WHITE HOUSE AND OFFICE OF MANAGEMENT AND BUDGET
93B	TECHINICAL ASSISTANCE AND TRAINING ON THE FEDERAL BUDGET PROCESS AND ON POLICIES THAT RESTRICT CITIZENS ABILITIES TO EXPRESS VIEWS PROVIDED TO RECIPIENTS OF GRANTS AND OTHER INTERESTED PARTIES. PUBLICATIONS OF BIMONTHLY MAGAZINE ABOUT GOVERNMENT INFORMATION AND REGULATION ISSUES.
93C	COST SHARING ENABLES MORE AVAILABILITY OF COMPUTER NETWORK PROVIDING ACCESS TO INFORMATION ON THE ENVIRONMENT, ITS PROTECTORS AND VIOLATORS (SPILLS/RELEASES OF TOXIC SUBSTANCES). ALL OF THE ABOVE INVORMATION

SCHEDULE A	OTHER INCOME			STATEMENT 13
DESCRIPTION	2001 AMOUNT	2000 AMOUNT	1999 AMOUNT	1998 AMOUNT
SEC 481A ADJUSTMENT	0.	26,250.	0.	0.
TOTAL TO SCHEDULE A, LINE 22	0.	26,250.	0.	0.

Name(s) shown on return  
**FOCUS PROJECT, INC.**

Business or activity to which this form relates  
**FORM 990 PAGE 2**

Identifying number  
**52-1302617**

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

1	Maximum amount. See instructions for a higher limit for certain businesses	1	24,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	\$200,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2001 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2003. Add lines 9 and 10, less line 12	13	

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

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

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election (see instructions)	15	
16	Other depreciation (including ACRS) (see instructions)	16	38,895.

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

<b>Section A</b>			
17	MACRS deductions for assets placed in service in tax years beginning before 2002	17	
18	If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2002 Tax Year Using the General Depreciation System						
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs.	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2002 Tax Year Using the Alternative Depreciation System						
20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year	/		40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.	22	38,895.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**Part V Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A - Depreciation and Other Information** (Caution: See instructions for limits for passenger automobiles.)**24a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
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**25** Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use**25****26** Property used more than 50% in a qualified business use:

	:	:	%					
	:	:	%					
	:	:	%					

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

	:	:	%			S/L -		
	:	:	%			S/L -		
	:	:	%			S/L -		

**28** Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1**28****29** Add amounts in column (i), line 26. Enter here and on line 7, page 1**29****Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

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

<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
<b>38</b> 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		
<b>39</b> Do you treat all use of vehicles by employees as personal use?		
<b>40</b> 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?		
<b>41</b> 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
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**42** Amortization of costs that begins during your 2002 tax year:

	:	:			
	:	:			

**43** Amortization of costs that began before your 2002 tax year**43****44** Total. Add amounts in column (f). See instructions for where to report**44**