



CAPITOL HILL
WASHINGTON DC 20003
202 543 2323

December 15, 2004

Steven T. Miller, Commissioner
Tax Exempt and Government Entities Division
Internal Revenue Service
1111 Constitution Avenue, NW
Washington, D.C. 20224

MUR # 5633

2004 DEC 27 A 10:49

RECEIVED
FEDERAL ELECTION
COMMISSION
OFFICE OF GENERAL
COUNSEL

cc: Lawrence H. Norton, Office of General Counsel, Federal Election Commission
Sarah Hall Ingram, Deputy Commissioner, IRS
Martha Sullivan, Director, Exempt Organizations, IRS


RE: Investigation Request

Dear Mr. Miller,

ProjectUSA urges an investigation, on grounds of unreported political funds transfer(s) involving two "§ 527" political groups, of:

- a) Mr. Chris Cannon, U.S. Representative from the third district of Utah
- b) Mr. Curtis Bramble, Utah State Senator
- c) Western Leadership Fund, a political group organized under § 527 of the Internal Revenue Code
- d) Coalition for Lower Internet Information Costs, a political group organized under § 527 of the Internal Revenue Code

Sincerely,


Craig Nelson
Director
ProjectUSA
PO Box 15641
Washington, DC 20003

DISTRICT OF COLUMBIA ss:

SUBSCRIBED AND
SWORN TO BEFORE ME THIS 15th day of
December, 2004.

I affirm the following to be true and complete
to the best of my knowledge.


Signature

12/15/2004
Date

Linda M. Wallace
Notary Public

12/15/04
Date

Linda M. Wallace
Notary Public District of Columbia
My Commission Expires 2/14/07

26044132908

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GROUND

UNREPORTED POLITICAL FUNDS TRANSFER INVOLVING TWO "§ 527" GROUPS

On its Internal Revenue Service Form 8872 for the period April-June, 2002, the Western Leadership Fund (WLF), a Utah-based political group organized under § 527 of the Internal Revenue Code, reported a disbursement of \$8,000.00 to another Utah § 527 organization, the Coalition for Lower Internet Information Costs (CLIIC).¹

However, in the Federal Election Commission filing for the corresponding quarter, CLIIC claims it received \$0.00 in gross income.² Indeed, CLIIC claims it received no income whatsoever for the entire year of 2002.³

CANNON / BRAMBLE RESPONSIBLE PARTY FOR BOTH GROUPS

During the period at issue, April-June 2002, Congressman Chris Cannon and Utah State Senator Curtis Bramble exerted operational control over both WLF and CLIIC.

WESTERN LEADERSHIP FUND

In June 2001, Rep. Cannon formed the Western Leadership Fund and, with two others (one the Chief of Staff in his House of Representatives office and the other a Washington lobbyist), served as one of its three founding directors.⁴

Between February and June 2002, Rep. Cannon moved the WLF to Utah, and a new directorate was installed.

One of the new directors was Curtis Bramble, a Utah state senator.

Another Utah director was a member of senior management at a company Rep. Cannon controlled, CFour Communications, which owed over one million dollars to Cannon Industries, a company Rep. Cannon co-owned with his brother.⁵

COALITION FOR LOWER INTERNET INFORMATION COSTS

Curtis Bramble is listed as the treasurer for the Coalition for Lower Internet Information Costs, though no organizing documents can be found on the IRS or the FEC websites for CLIIC.

¹ Appendix A: IRS Form 8872, 2nd Qtr 2002 (WLF; disbursement to CLIIC)

² Appendix B: FEC filing 2nd Qtr 2002 (CLIIC)

³ Appendix C: FEC filing 3X Year 2002 (CLIIC)

⁴ Appendix D: IRS Form 990EZ 2001

⁵ Appendix E: Satisfaction and Release of Promissory Note

RELEVANT INFORMATION

BRAMBLE CANNON'S CAMPAIGN TREASURER

Utah State Senator Curtis Bramble served as Campaign Treasurer for Cannon for Congress, the Principal Campaign Committee (C00344705) for Rep. Cannon in 2002 and 2004.

Mr. Bramble, a Certified Public Accountant, is with the firm, Gilbert & Stewart, P.C. of Provo, Utah.

BRAMBLE SIGNATURES

Curtis Bramble is the signatory for official disclosure and compliance documents for

- Cannon for Congress
- Coalition for Lower Internet Information Costs
- Western Leadership Fund

BRAMBLE ADDRESSES

190 West 800 North Suite 100
Provo, UT 84601

The address shown above serves/d as the address for:

- Curtis Bramble's accounting practice
- Cannon for Congress
- Coalition for Lower Internet Information Costs (in the disbursements section on the Western Leadership Fund's 2nd Quarter 2002 IRS Form 8872 filing)
- Western Leadership Fund (after move to Utah)

26044132911

LIST OF APPENDICES

PUBLIC DOCUMENTS

- A) IRS Form 8872, 2nd Qtr 2002 (WLF; disbursement to CLIIC)
- B) FEC filing 2nd Qtr 2002 (CLIIC)
- C) FEC filing 3X Year 2002 (CLIIC)
- D) IRS Form 990EZ 2001 (WLF)
- E) Satisfaction and Release of Promissory Note

26044132912

**Political Organization
Report of Contributions and Expenditures**

OMB No 1545 1696

► See Separate instructions

A For the period beginning January 1 20 03 and ending June 30 20 03

B Check applicable boxes ☐ Initial report ☐ Change of address ☐ Amended report ☐ Final report

1 Name of organization Western Leadership Fund Employer identification number 52 2325294

2 Mailing address (P O Box or number street and room or suite number)

190 W 800 N Ste 100

City or town state and ZIP code

Provo, UT 84601

3 E mail address of organization

4 Date organization was formed

06/01/01

5a Name of custodian of records

Curtis S Bramble

5b Custodian's address

190 W 800 N Ste 100

Provo, UT 84601

6a Name of contact person

Curtis S Bramble

6b Contact person's address

190 W 800 N Ste 100

7 Business address of organization (if different from mailing address shown above) Number street and room or suite number

City or town state and ZIP code

8 Type of report (check only one box)

a ☐ First quarterly report (due by April 15)

b ☐ Second quarterly report (due by July 15)

c ☐ Third quarterly report (due by October 15)

d ☐ Year-end report (due by January 31)

e ☒ Mid-year report (Non-election
year only-due by July 31)

f ☐ Monthly report for the month of _____
(due by the 20th day following the month shown above except the
December report which is due by January 31)

g ☐ Pre-election report (due by the 12th or 15th day before the election)

(1) Type of election _____

(2) Date of election _____

(3) For the state of _____

h ☐ Post general election report (due by the 30th day after general election)

(1) Date of election _____

(2) For the state of _____

9 Total amount of reported contributions (total from all attached Schedules A)

9

0 00

10 Total amount of reported expenditures (total from all attached Schedules B)

10

1956 88

Sign
Here

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

Signature of authorized official

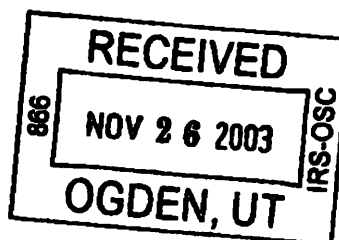
Date

7/31/03

For Paperwork Reduction Act Notice, see separate instructions

Cat No 30406G

Form **8872** (11 2002)



2

Itemized Expenditures		Schedule B page 2 of 2
Name of organization		Employer identification number
WESTERN LEADERSHIP FUND		52-2325294
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period
	Recipient's occupation	
BARRY PHILLIPS 1810 NORTH SUNRISE DR. OREM, UT 84097		\$ 3,000.00
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period
	Recipient's occupation	
COALITION FOR LOWER INTERNET INFO. COST 190 WEST 800 NORTH STE. 100 PROVO, UT 84601		\$ 8,000.00
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period
	Recipient's occupation	
WESTERN COUNTIES ALLIANCE PO BOX 510 HEBER, UT 84032		\$ 12,000.00
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period
	Recipient's occupation	
UTAH COUNTY CLERKS 100 EAST CENTER ST. STE. 3100 PROVO, UT 84606		\$ 311.27
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period
	Recipient's occupation	
WELLS FARGO 66 EAST 1650 NORTH PROVO, UT 84604		\$ 61.25
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period
	Recipient's occupation	
DOUG CANNON 3679 NORTH 550 EAST PROVO, UT 84604		\$ 1,638.90
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period
	Recipient's occupation	
SUN ROCK		\$ 2,500.00
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period
	Recipient's occupation	
		\$
Recipient's name, mailing address and ZIP code	Name of recipient's employer	Amount of each expenditure reported for this period
	Recipient's occupation	
		\$
Subtotal of expenditures reported on this page only. Enter here and also include this amount in the total on line 10 of Form 8872.		\$ 27,511.42

26044132914

Goto Page # Next Page Last Page PDF
 TO REPORTS INDEX NEW SEARCH NEW ADVANCED SEARCH

22037664106

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For Other Than An Authorized Committee

RECEIVED
FEC MAIL ROOM

2002 JUL 20 P 12:48

Office Use Only

1. NAME OF
COMMITTEE (in full)

USE FEC MAILING LABEL
OR TYPE OR PRINT

Example: If typing, type
over the lines.

12FE4M5

COALITION FOR LOWER INTEREST INFORMATION COSTS

ADDRESS (number and street)

1747 PENNSYLVANIA AVE NW STE 1000



Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20004-4634

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00369653

3. IS THIS
REPORT

☐ NEW
(N)

OR

☐ AMENDED
(A)

4. TYPE OF REPORT
(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☒ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

☐ Feb 20 (M2)

☐ May 20 (M5)

☐ Aug 20 (M8)

☐ Nov 20 (M11)

☐ (Non-Election
Year Only)

☐ Mar 20 (M3)

☐ Jun 20 (M6)

☐ Sep 20 (M9)

☐ Dec 20 (M12)

☐ (Non-Election
Year Only)

☐ Apr 20 (M4)

☐ Jul 20 (M7)

☐ Oct 20 (M10)

☐ Jan 31 (YE)

☐ (Non-Election
Year Only)

(c) 12-Day
PRE-Election
Report for the:

☐ Primary (12P)

☐ General (12G)

☐ Runoff (12R)

☐ Convention (12C)

☐ Special (12S)

Election on

In the
State of

(d) 30-Day
POST-Election
Report for the:

☐ General (30G)

☐ Runoff (30R)

☐ Special (30S)

☐ Election on

In the
State of

5. Covering Period

10/1/2001 through 10/30/2002

through

10/30/2002

26044132915

22037664107

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

WAGTON FOR LOWER INTRNET INFORMATION COST

Report Covering the Period:

From:

04/01/2002

To:

06/30/2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. (a) Cash on Hand January 1:	<u>NONE</u>	<u>NONE</u>
(b) Cash on Hand at Beginning of Reporting Period	<u>NONE</u>	
(c) Total Receipts (from Line 19)		
(d) Subtotal (add Lines 6(b) and 8(c) for Column A and Lines 6(a) and 8(c) for Column B)		
7. Total Disbursements (from Line 30)		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		<u>NONE</u>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	<u>NONE</u>	

☐ This committee has qualified as a noncandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

FEC2002

26044132916

23037992451

FEC
FORM 3XREPORT OF RECEIPTS
AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER7001 FEB 24 A 11:59
Office Use Only1. NAME OF
COMMITTEE (in full)USE FEC MAILING LABEL
OR TYPE OR PRINTExample: If typing, type
over the lines.

12FE4M5

COMMISSION FOR THE FUTURE OF AMERICA, INC.

ADDRESS (number and street)

1741 PENNSYLVANIA AVE. NW, STE. 1000

Check if different
than previously
reported (ACC)

WASHINGTON DC 20004-4626

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

001559000

3. IS THIS
REPORT☐NEW
(N)

OR

☐AMENDED
(A)4. TYPE OF REPORT
(Choose One)

(a) Quarterly Reports.

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☒ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day
PRE-Election
Report for the☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

in the
State of(d) 30-Day
POST-Election
Report for the☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

in the
State of

5. Covering Period

11 FEB 2002

through

12 FEB 2002

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

MARK S. BRAMBLE

Signature of Treasurer

Date

12 FEB 2002

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §487g.

Office Use Only									
-----------------------	--	--	--	--	--	--	--	--	--

FEC FORM 3X
(Revised 1/01)

FEC/MD1

26044132917

23037992452

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

MAINTAIN FOR LOWER INCOME INFORMATION CENTS

Report Covering the Period

From:

11:22:2002

To:

12:31:2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6 (a) Cash on Hand January 1, <u>11/22/02</u>		<u>NONE</u>
(b) Cash on Hand at Beginning of Reporting Period <u>11/22/02</u>		
(c) Total Receipts (from Line 19) <u>11/22/02</u>		
(d) Subtotal (add Lines 6(b) and 8(c) for Column A and Lines 6(a) and 8(c) for Column B) <u>11/22/02</u>		
7. Total Disbursements (from Line 30) <u>11/22/02</u>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) <u>11/22/02</u>		
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) <u>11/22/02</u>		
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) <u>11/22/02</u>		

☐ This committee has qualified as a multicandidate committee (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

Form **990-EZ****Short Form****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)

► For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year

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

OMB No 1545-1150

2001

Open to Public Inspection

Department of the Treasury
Internal Revenue ServiceA For the 2001 calendar year, or tax year beginning Jan. 1, 2001, and ending Dec. 31, 2001

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 Instructions.

C Name of organization

WESTERN LEADERSHIP FUND

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

1666 K STREET, NW 1200

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

WASHINGTON, DC 20006

D Employer identification number

52 2325294

E Telephone number

(202) 255-0775

F Enter 4-digit (GEN) ►

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

G Accounting method ☒ Cash ☐ Accrual
 Other (specify) ►

I Web site ► NONE

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

J Organization type (check only one)— ☐ 501(c) () (insert no) ☐ 4947(a)(1) or ☒ 527

K Check ☐ 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 Add lines 5b, 6b, and 7b to line 9 to determine gross receipts. If \$100,000 or more, file Form 990 instead of Form 990-EZ. ► \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 35)

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	<u>20850</u>
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	
	4 Investment income	4	
	5a Gross amount from sale of assets other than inventory	5a	
	b Less cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)		
	6 Special events and activities (attach schedule)		
	a Gross revenue (not including \$ of contributions reported on line 1)	6a	
b Less direct expenses other than fundraising expenses	6b		
c Net income or (loss) from special events and activities (line 6a less line 6b)			
7a Gross sales of inventory less returns and allowances	7a		
b Less cost of goods sold	7b		
c Gross profit or (loss) from sales of inventory (line 7a less line 7b)	7c		
8 Other revenue (describe ►)	8		
9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	<u>20850</u>	
Expenses	10 Grants and similar amounts paid (attach schedule)	10	<u>1300</u>
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	<u>3100</u>
	14 Occupancy, rent, utilities, and maintenance	14	
	15 Printing, publications, postage, and shipping	15	<u>869</u>
	16 Other expenses (describe ►)	16	<u>445</u>
	17 Total expenses (add lines 10 through 16)	17	<u>5714</u>
Net Assets	18 Excess or (deficit) for the year (line 9 less line 17)	18	<u>15136</u>
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	
	20 Other changes in net assets or fund balances (attach explanation)	20	
	21 Net assets or fund balances at end of year (combine lines 18 through 20)	21	<u>15136</u>

Part II Balance Sheets—If Total assets on line 25, column (B), are \$250,000 or more, file Form 990 instead of Form 990-EZ

(See Specific Instructions on page 39)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	<u>0</u>	22 <u>15136</u>
23 Land and buildings		23
24 Other assets (describe ►)		24
25 Total assets	<u>0</u>	25 <u>15136</u>
26 Total liabilities (describe ►)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	<u>0</u>	27 <u>15136</u>

For Paperwork Reduction Act Notice, see the separate instructions

Cat No 106421

Form 990-EZ (2001)

26044132919

SCANNED APR 30 '02

13

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 40)		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts optional for others)
What is the organization's primary exempt purpose? <u>POLITICAL ORGANIZATION</u>		
Describe what was achieved in carrying out the organization's exempt purposes in a clear and concise manner describe the services provided, the number of persons benefited, or other relevant information for each program title		
28	<u>THE ENTITY PAID \$20550 FOR THE 2002 CAMPAIGN CYCLE. IN 2001, \$1300 WAS DISBURSED TO STATE AND LOCAL CANDIDATES.</u> (Grants \$ <u>1300</u>)	28a
29	(Grants \$)	29a
30	(Grants \$)	30a
31	Other program services (attach schedule) (Grants \$)	31a
32	Total program service expenses (add lines 28a through 31a)	32

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See Specific Instructions on page 40)				
(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
<u>DAVID SAFAVIAN, 1314 GATEWOOD ALEXANDRIA, VA 22307</u>	<u>10</u>	<u>0</u>	<u>0</u>	<u>0</u>
<u>BETHANY NOBLE, 1666 K STREET, NW SUITE 1200, WASH. DC 20006</u>	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>
<u>CHRIS CANNON, 875 EAST 1600 NORTH MAPLETON UTAH 84664</u>	<u>1</u>	<u>0</u>	<u>0</u>	<u>0</u>

Part V Other Information (Note the attachment requirement in General Instruction V, page 14)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		<input checked="" type="checkbox"/>
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		<input checked="" type="checkbox"/>
35	If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but NOT reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		<input checked="" type="checkbox"/>
a	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting and proxy tax requirements?		<input checked="" type="checkbox"/>
b	If "Yes," has it filed a tax return on Form 990-T for this year?		<input checked="" type="checkbox"/>
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement)		<input checked="" type="checkbox"/>
37a	Enter amount of political expenditures direct or indirect, as described in the instructions <u>37a</u> <u>1300</u>		<input checked="" type="checkbox"/>
b	Did the organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/>
38a	Did the organization borrow from, or make any loans to, any officer, director trustee or key employee OR were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		<input checked="" type="checkbox"/>
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved <u>38b</u>		
39	501(c)(7) organizations Enter a initiation fees and capital contributions included on line 9 <u>39a</u>		
b	Gross receipts, included on line 9, for public use of club facilities <u>39b</u>		
40a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u> </u> , section 4912 <u> </u> , section 4955 <u> </u>		
b	501(c)(3) and (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 an explanation		
c	Amount of tax imposed on organization managers or disqualified persons during the year under 4912, 4955, and 4958 <u> </u>		
d	Enter Amount of tax on line 40c, above, reimbursed by the organization <u> </u>		
41	List the states with which a copy of this return is filed <u>DISTRICT OF COLUMBIA</u>		
42	The books are in care of <u>DAVID SAFAVIAN</u> Telephone no <u>(202) 255-0775</u> Located at <u>1314 GATEWOOD DR. ALEXANDRIA, VA</u> ZIP + 4 <u>22307</u>		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <u>43</u>		

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 <u>DAVID SAFAVIAN</u>	Date <u>3-15-2002</u>
Paid Preparer's Use Only	Preparer's signature <u>DAVID SAFAVIAN, PRESIDENT AND CEO</u>	Date <u> </u>
	Firm's name (for yours if self-employed) address and ZIP + 4 <u> </u>	Check if self-employed <input type="checkbox"/>
	EIN <u> </u>	Preparer's SSN or PTIN (See Gen. Inst. W) <u> </u>
	Phone no <u> </u>	

