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Return of Organization Exempt From Income Tax

2002

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2002 calendar year, or tax year beginning 2002, and ending

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: COMMUNICATIONS CONSORTIUM MEDIA CENTER. D Employer identification number: 52-1524972. E Telephone number: (202) 326-8700. F Accounting method: Cash, Accrual.

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

G Web site: N/A

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

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

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12: 2,865,230

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions)

Table with 21 rows and 4 columns: Description, Sub-description, Amount, Total. Includes revenue from contributions, program service, membership dues, interest, dividends, rents, other investment income, sales of assets, special events, and inventory. Total revenue: 2,862,246. Total expenses: 4,506,447. Net assets at end of year: 2,422,895.

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Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 21 of the instructions.)

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 \$ _____ noncash \$ _____)				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc	265,996	96,215	135,638	34,143
26	Other salaries and wages	961,879	642,364	185,532	133,983
27	Pension plan contributions	74,944	48,716	16,383	9,845
28	Other employee benefits	108,575	65,484	28,081	15,010
29	Payroll taxes	86,003	52,227	21,939	11,837
30	Professional fundraising fees				
31	Accounting fees				
32	Legal fees				
33	Supplies	41,407	29,435	6,947	5,025
34	Telephone	146,500	137,950	1,920	6,630
35	Postage and shipping	44,454	35,059	4,215	5,180
36	Occupancy	318,288	194,529	80,871	42,888
37	Equipment rental and maintenance	29,930	13,482	16,368	80
38	Printing and publications	106,805	98,064	1,465	7,276
39	Travel	247,342	212,238	20,222	14,882
40	Conferences, conventions, and meetings	140,824	104,855	6,610	29,359
41	Interest	970		970	
42	Depreciation depletion etc (attach schedule)	46,394		46,394	
43	Other expenses not covered above (itemize) STMT 1	1,886,136	1,689,076	131,969	65,091
b					
c					
d					
e					
44	Total functional expenses (add lines 22 through 43) <i>Organizations completing columns (B)-(D), carry these totals to lines 13-15</i>	4,506,447	3,419,694	705,524	381,229

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 (See page 24 of the instructions)

What is the organization's primary exempt purpose? **STMT 2**

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	FAMILY POLICY - A COLLABORATIVE RESOURCE FOR PUBLIC INTEREST ORGANIZATIONS WORKING ON FAMILY POLICY ISSUES TO HELP IN THEIR STRATEGIC USE OF MEDIA AND TELECOMMUNICATIONS (Grants and allocations \$ _____)	1,134,785
b	GLOBAL STEWARDSHIP INITIATIVE - DESIGN AND IMPLEMENT A COMPREHENSIVE COMMUNICATIONS STRATEGY TO ENHANCE PUBLIC AWARENESS CONCERNING WORLD POPULATION GROWTH AND ITS IMPACT (Grants and allocations \$ _____)	1,478,168
c	TECHNICAL SERVICES - ASSIST PUBLIC INTEREST ORGANIZATIONS TO MAXIMIZE THEIR USE OF MEDIA AND TELECOMMUNICATIONS AS TOOLS FOR PUBLIC EDUCATION AND POLICY CHANGE (Grants and allocations \$ _____)	656,958
d	SOCIAL JUSTICE - INITIATIVE SEEKS TO INCREASE AND IMPROVE COVERAGE OF CIVIL RIGHTS AND RACE IN MAINSTREAM MEDIA (Grants and allocations \$ _____)	149,783
e	Other program services (attach schedule) (Grants and allocations \$ _____)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	3,419,694

Part IV Balance Sheets (See page 24 of the instructions)

Note <i>Where required, attached schedules and amounts within the description column should be for end-of-year amounts only</i>		(A) Beginning of year		(B) End of year
45	Cash - non-interest-bearing	44,523	45	109,270
46	Savings and temporary cash investments	1,466,032	46	1,392,184
47a	Accounts receivable	1,004,996		
b	Less allowance for doubtful accounts		47c	1,004,996
48a	Pledges receivable		48a	
b	Less allowance for doubtful accounts		48b	
49	Grants receivable		49	
50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
51a	Other notes and loans receivable (attach schedule)			
b	Less allowance for doubtful accounts		51c	
52	Inventories for sale or use		52	
53	Prepaid expenses and deferred charges	15,569	53	67,838
54	Investments - securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
55a	Investments - land, buildings, and equipment basis			
b	Less accumulated depreciation (attach schedule)		55c	
56	Investments - other (attach schedule)		56	
57a	Land, buildings, and equipment basis	279,942		
b	Less accumulated depreciation (attach schedule)	200,965	57c	78,977
58	Other assets (describe ► <u>STMT 3</u>)	51,790	58	9,338
59	Total assets (add lines 45 through 58) (must equal line 74)	4,314,665	59	2,662,603
60	Accounts payable and accrued expenses	220,909	60	216,600
61	Grants payable		61	
62	Deferred revenue		62	
63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
64a	Tax-exempt bond liabilities (attach schedule)		64a	
b	Mortgages and other notes payable (attach schedule)		64b	
65	Other liabilities (describe ► <u>STMT 4</u>)	26,660	65	23,108
66	Total liabilities (add lines 60 through 65)	247,569	66	239,708
Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
67	Unrestricted	1,291,753	67	1,258,811
68	Temporarily restricted	2,775,343	68	1,164,084
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)	4,067,096	73	2,422,895
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	4,314,665	74	2,662,603

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 (See page 27 of the instructions)

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b If "Yes," has it filed a tax return on Form 990-T for this year?		X
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		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? b If "Yes," enter the name of the organization _____ _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		X
81 a Enter direct or indirect political expenditures See line 81 instructions	81a	NONE
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? 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)	82a	X
83 a Did the organization comply with the public inspection requirements for returns and exemption applications? b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83a	X
84 a Did the organization solicit any contributions or gifts that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84a	X
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? 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	85a	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 on line 85f?	85g	N/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86 501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12 b Gross receipts, included on line 12, for public use of club facilities	86a	N/A
87 501(c)(12) orgs Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87a	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"/> NONE, section 4912 <input type="checkbox"/> NONE, section 4955 <input type="checkbox"/> NONE b 501(c)(3) and 501(c)(4) orgs 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 c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="checkbox"/> NONE d Enter Amount of tax on line 89c, above, reimbursed by the organization <input type="checkbox"/> NONE	89a	NONE
90 a List the states with which a copy of this return is filed <input checked="" type="checkbox"/> DISTRICT OF COLUMBIA b Number of employees employed in the pay period that includes March 12, 2002 (See instructions)	90b	18
91 The books are in care of <input checked="" type="checkbox"/> THE ORGANIZATION Telephone no <input checked="" type="checkbox"/> (202) 326-8700 Located at <input checked="" type="checkbox"/> ORGANIZATION ADDRESS ZIP + 4 <input checked="" type="checkbox"/> 20005-1754		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> 92 <input type="checkbox"/> N/A	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) Exclusion code	(D) Amount	
93 Program service revenue					
a					
b					
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	27,894	
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			18	-2,984	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a					
b REIMBURSED EXPENSE					116,854
c PUBLICATIONS					7,677
d					
e					
104 Subtotal (add columns (B), (D), and (E))				24,910	124,531
105 Total (add line 104, columns (B), (D), and (E))					149,441

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)
103B	REIMBURSEMENTS FOR PROGRAM EXPENSES
103C	PUBLICATIONS EDUCATING NON-PROFIT ORGANIZATIONS IN THE TECHNIQUES OF USING THE MEDIA

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
	%			
	%			
	%			
	%			

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)

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.

Please Sign Here

Signature of officer: Diane E. Lutze Date: 11/11/03

Type or print name and title: DIANE E LUTZE, VICE PRESIDENT / ASSISTANT SECRETARY

Paid Preparer's Use Only

Preparer's signature: [Signature] Date: 11/19/03 Check if self-employed: Preparer's SSN or PTIN (See Gen. Inst. W): 213-46-8134

Firm's name (or yours if self-employed): GILBERT & WOLFAND, P.C. EIN: 52-1263814

address and ZIP + 4: 2201 WISCONSIN AVE, NW SUITE 320 Phone no: 202-342-6000

WASHINGTON, DC 20007

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

COMMUNICATIONS CONSORTIUM MEDIA CENTER

Employer identification number

52-1524972

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
<u>PHILIP L SPARKS</u> 203 W MASON AVENUE ALEXANDRIA, VA 22301	VICE PRESIDENT 37 5 HRS	118,019	11,802	NONE
<u>LAURA R ROGERS</u> 1241 E STREET, SE WASHINGTON, DC 20003	VICE PRESIDENT 37 5 HRS	98,626	9,890	NONE
<u>KRISTINE MEJIA</u> 5502 MANORFIELD ROAD ROCKVILLE, MD 20853	SENIOR PROJECT ASSOC 37 5 HRS	66,258	6,613	NONE
<u>ANGELA C SNYDER</u> 2401 H STREET, NW, APT 805 WASHINGTON, DC 20037	SENIOR PROJECT ASSOC 37 5 HRS	59,122	5,901	NONE
<u>SUSAN BOERSTLING</u> 4432 SOUTH 34TH STREET ARLINGTON, VA 22206	SENIOR ASSOCIATE 37 5 HRS	56,908	5,614	NONE
Total number of other employees paid over \$50,000	▶ NONE			

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
<u>GOOD WORKS GROUP, LLC</u> 3800 ARAPAHOE AVENUE, BOULDER, CO 80303	CONSULTANT	110,250.
<u>JOANNE OMANG</u> 3016 TILDEN ST, NW WASHINGTON, DC 20008	MEDIA STRATEGIST	60,000
<u>PAUL P HOFFMAN II</u> 3142 DUMBARTON ST, NW, WASHINGTON, DC 20007	TECHNICAL CONSULTANT	58,017
<u>NANCY D BENNETT</u> 2750 TOPSAIL RD, CONCEPTION BAY S, CANADA	STRATEGIC COMMUNICTN	54,900
Total number of others receiving over \$50,000 for professional services	▶ NONE	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ

Schedule A (Form 990 or 990-EZ) 2002

JSA
2E1210 1 000

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 ▶ \$ <u>87,575</u> . (Must equal amounts on line 38, Part VI-A, or line 1 or Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a	Sale, exchange, or leasing of property?	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.			

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)
- 6 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)

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

Table with columns: Calendar year (or fiscal year beginning in), (a) 2001, (b) 2000, (c) 1999, (d) 1998, (e) Total. Rows include: 15 Gifts, grants, and contributions received; 16 Membership fees received; 17 Gross receipts from admissions, merchandise sold or services performed; 18 Gross income from interest, dividends, amounts received from payments on securities loans; 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; 22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets; 23 Total of lines 15 through 22; 24 Line 23 minus line 17; 25 Enter 1% of line 23; 26 Organizations described on lines 10 or 11; 27 Organizations described on line 12; 28 Unusual Grants.

Part V Private School Questionnaire (See page 7 of the instructions)
(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?	32d	
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?	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)		

34a 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	

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		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		20,530
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		67,045
38 Total lobbying expenditures (add lines 36 and 37)	38		87,575
39 Other exempt purpose expenditures	39		4,418,872
40 Total exempt purpose expenditures (add lines 38 and 39)	40		4,506,447
41 Lobbying nontaxable amount Enter the amount from the following table -			
If the amount on line 40 is -			
Not over \$500,000	20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	41	375,322
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		93,831
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44		

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

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
See the instructions for lines 45 through 50 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	375,322	386,936	350,254	340,744	1,453,256
46 Lobbying ceiling amount (150% of line 45(e))					2,179,884
47 Total lobbying expenditures	87,575	16,297	55,608	8,302	167,782
48 Grassroots nontaxable amount	93,831	96,734	87,564	85,186	363,315
49 Grassroots ceiling amount (150% of line 48(e))					544,973
50 Grassroots lobbying expenditures	20,530	2,568	8,235	797	32,130

Part VI-B Lobbying Activity by Nonelecting Public Charities

NOT APPLICABLE

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
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)			

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

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

(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.

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

52a 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

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
CONTRACT SERVICES	1,791,640.	1,624,097.	115,804.	51,739.
CONTRIBUTIONS	3,895.	1,850.	275.	1,770.
DUES AND PUBLICATIONS	66,491.	53,466.	1,443.	11,582.
INSURANCE	11,171.		11,171.	
LOSS-GRANT RECEIVABLE REVISION	8,480.	8,480.		
REPAIRS AND MAINTENANCE	4,459.	1,183.	3,276.	
TOTALS	1,886,136.	1,689,076.	131,969.	65,091.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE
=====

GENERALIZED INSTRUCTION FOR NON-PROFITS ON THE USE OF MEDIA STRATEGIES AND NEW COMMUNICATIONS TECHNOLOGIES. ALSO, ASSISTANCE IN CONDUCTING PUBLIC EDUCATION ISSUES CAMPAIGNS ON BEHALF OF COALITIONS FORMED BY VARIOUS NON-PROFIT ORGANIZATIONS AROUND CERTAIN ISSUES.

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION	ENDING BOOK VALUE
-----	-----
SALARY/TRAVEL ADVANCES	6,368.
ACCRUED INTEREST RECEIVABLE	2,970.
TOTALS	----- 9,338. =====

FORM 990, PART IV - OTHER LIABILITIES

=====

DESCRIPTION -----	ENDING BOOK VALUE -----
PAYROLL TAXES/WHLDINGS PAYABLE	23,108.

TOTALS	23,108.
	=====

FORM 990, PART IV-A - OTHER REVENUE ON RETURN BUT NOT ON BOOKS

DESCRIPTION	AMOUNT
LOSS ON DISPOSITION OF ASSETS	-2,984.
TOTAL	-2,984.

FORM 990, PART IV-B - OTHER EXPENSES ON BOOKS BUT NOT ON RETURN

DESCRIPTION -----	AMOUNT -----
LOSS ON DISPOSITION OF ASSETS	2,984.

TOTAL	2,984.
	=====

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
RICHARD W. BOONE 1226 1/2 STATE ST., SUITE 5 SANTA BARBARA, CA 93101	CHAIR AS NEEDED	NONE	NONE	NONE
KATHLEEN L. BONK 1200 NEW YORK AVE, NW, SUITE 300 WASHINGTON, DC 20005	PRESIDENT 37.5 HRS	145,000.	14,500.	NONE
RAYDEAN M. ACEVEDO 651 CORPORATE CIRCLE, SUITE 123 GOLDEN, CO 80401	VICE PRES/SECRETARY AS NEEDED	NONE	NONE	NONE
KEN NOCHIMSON ASPEN CORPORATE PARK TWO, SUITE 207 1460 ROUTE 9 NORTH WOODBIDGE, NJ 07095	TREASURER AS NEEDED	NONE	NONE	NONE
ALBERT KRAMER 2101 L ST., NW, SUITE 800 WASHINGTON, DC 20037-1526	DIRECTOR AS NEEDED	NONE	NONE	NONE
MAL JOHNSON 7237 WORSLEY WAY ALEXANDRIA, VA 22315	DIRECTOR AS NEEDED	NONE	NONE	NONE
ROBERT LOEB 56 BENSON STREET GLEN RIDGE, NJ 07028	DIRECTOR AS NEEDED	NONE	NONE	NONE
JUAN SEPULVEDA 118 BROADWAY, SUITE 619	DIRECTOR AS NEEDED	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
SAN ANTONIO, TX 78205				
DIANE CUTRI 1200 NEW YORK AVE, NW, SUITE 300 WASHINGTON, DC 20005	ASST SECRETARY 37.5 HRS	120,996.	12,100.	NONE
YING YING YUAN 12300 TWINBROOK PARKWAY, SUITE 310 ROCKVILLE, MD 20852	DIRECTOR AS NEEDED	NONE	NONE	NONE
FRANK SMITH 26 HINGHAM STREET #2 CAMBRIDGE, MA 02138	DIRECTOR AS NEEDED	NONE	NONE	NONE
DIANA MEEHAN P.O. BOX 12949 MARINA DEL RAY, CA 90295-3949	DIRECTOR AS NEEDED	NONE	NONE	NONE
MARLENE JOHNSON 1307 NEW YORK AVENUE, NW EIGHTH FLOOR WASHINGTON, DC 20005-4701	DIRECTOR AS NEEDED	NONE	NONE	NONE
GRAND TOTALS		265,996.	26,600.	NONE

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D
=====

SEE FORM 990, PART V

SCHEDULE A, PART IV-A - OTHER INCOME

DESCRIPTION	2001	2000	1999	1998	TOTAL
REIMBURSED EXPENSES	35,635.	12,498.	52,530.	18,322.	118,985.
PUBLICATIONS	3,320.	8,200.	11,491.	1,306.	24,317
RENTAL INCOME				4,142.	4,142.
TOTALS	38,955.	20,698.	64,021.	23,770.	147,444.

Sales of Business Property
 (Also Involuntary Conversions and Recapture Amounts
 Under Sections 179 and 280F(b)(2))

▶ Attach to your tax return ▶ See separate instructions

Name(s) shown on return COMMUNICATIONS CONSORTIUM MEDIA CENTER	Identifying number 52-1524972
--	---

1 Enter the gross proceeds from sales or exchanges reported to you for 2002 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 (see instructions) **1**

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year (See instructions)

(a) Description of property	(b) Date acquired (mo day yr)	(c) Date sold (mo, day, yr)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
2 SEE STATEMENT 2						-2,984

3 Gain, if any, from Form 4684, line 39	3
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37	4
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824	5
6 Gain, if any, from line 32, from other than casualty or theft	6
7 Combine lines 2 through 6 Enter the gain or (loss) here and on the appropriate line as follows Partnerships (except electing large partnerships) and S corporations Report the gain or (loss) following the instructions for Form 1065 Schedule K line 6, or Form 1120S Schedule K, line 5 Skip lines 8, 9, 11, and 12 below All others If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9 If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on Schedule D and skip lines 8, 9, 11, and 12 below	7 -2,984
8 Nonrecaptured net section 1231 losses from prior years (see instructions)	8
9 Subtract line 8 from line 7 If zero or less, enter -0- If line 9 is zero, enter the gain from line 7 on line 12 below If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on Schedule D (see instructions)	9

Part II Ordinary Gains and Losses

10 Ordinary gains and losses not included on lines 11 through 17 (include property held 1 year or less)

11 Loss, if any, from line 7	11 (2,984)
12 Gain, if any, from line 7 or amount from line 8, if applicable	12
13 Gain, if any, from line 31	13
14 Net gain or (loss) from Form 4684, lines 31 and 38a	14
15 Ordinary gain from installment sales from Form 6252, line 25 or 36	15
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824	16
17 Recapture of section 179 expense deduction for partners and S corporation shareholders from property dispositions by partnerships and S corporations (see instructions)	17
18 Combine lines 10 through 17 Enter the gain or (loss) here and on the appropriate line as follows a For all except individual returns Enter the gain or (loss) from line 18 on the return being filed b For individual returns	18 -2,984
(1) If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 27, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 22 Identify as from "Form 4797, line 18b(1)" See instructions	18b(1)
(2) Redetermine the gain or (loss) on line 18 excluding the loss, if any, on line 18b(1) Enter here and on Form 1040, line 14	18b(2)

For Paperwork Reduction Act Notice, see page 7 of the instructions Form **4797** (2002)

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property	(b) Date acquired (mo, day yr)	(c) Date sold (mo, day, yr)		
A				
B				
C				
D				
These columns relate to the properties on lines 19A through 19D	Property A	Property B	Property C	Property D
20 Gross sales price (Note See line 1 before completing)	20			
21 Cost or other basis plus expense of sale	21			
22 Depreciation (or depletion) allowed or allowable	22			
23 Adjusted basis Subtract line 22 from line 21 . . .	23			
24 Total gain Subtract line 23 from line 20	24			
25 If section 1245 property				
a Depreciation allowed or allowable from line 22	25a			
b Enter the smaller of line 24 or 25a	25b			
26 If section 1260 property If straight line depreciation was used enter 0 on line 26g except for a corporation subject to section 291				
a Additional depreciation after 1975 (see instructions)	26a			
b Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions) . . .	26b			
c Subtract line 26a from line 24 If residential rental property or line 24 is not more than line 26a skip lines 26d and 26e	26c			
d Additional depreciation after 1969 and before 1976	26d			
e Enter the smaller of line 26c or 26d	26e			
f Section 291 amount (corporations only)	26f			
g Add lines 26b, 26e, and 26f	26g			
27 If section 1262 property Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership)				
a Soil, water, and land clearing expenses	27a			
b Line 27a multiplied by applicable percentage (see instructions)	27b			
c Enter the smaller of line 24 or 27b	27c			
28 If section 1254 property				
a Intangible drilling and development costs expenditures for development of mines and other natural deposits and mining exploration costs (see instructions)	28a			
b Enter the smaller of line 24 or 28a	28b			
29 If section 1255 property				
a Applicable percentage of payments excluded from income under section 126 (see instructions)	29a			
b Enter the smaller of line 24 or 29a (see instructions)	29b			

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30

30 Total gains for all properties Add property columns A through D, line 24	30
31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b Enter here and on line 13	31
32 Subtract line 31 from line 30 Enter the portion from casualty or theft on Form 4684, line 33 Enter the portion from other than casualty or theft on Form 4797, line 6	32

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less (See instructions)

	(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years	33	
34 Recomputed depreciation See instructions	34	
35 Recapture amount Subtract line 34 from line 33 See the instructions for where to report	35	

COMMUNICATIONS CONSORTIUM MEDIA CENTER
Supplement to Form 4797 Part I Detail

Description	Date Acquired	Date Sold	Gross Sales Price	Depreciation Allowed or Allowable	Cost or Other Basis	Gain or (Loss) for entire year
READING TREE	07/17/1997	12/31/2002	NONE	118.	138.	-20.
CALCULATOR	02/01/1994	12/31/2002	NONE	126.	126.	
MEGAHERTZ PCMCIA 144	06/02/1995	12/31/2002	NONE	200.	200.	
UNIMATE EASEL	06/29/1995	12/31/2002	NONE	281.	281.	
HP OMNIBOOK 600C W/8	06/14/1995	12/31/2002	NONE	3,198.	3,198.	
32 ETHER EXPRESS PRO	09/18/1995	12/31/2002	NONE	999.	999.	
ETHERWAVE PRINT ADAP	09/11/1995	12/31/2002	NONE	265.	265.	
ETHERNET 10 PACK	12/06/1995	12/31/2002	NONE	1,004.	1,004.	
SPORTSTER 28.8 V3.4	02/15/1996	12/31/2002	NONE	234.	234.	
CAVIAR INT 2.1GB HDD	07/22/1997	12/31/2002	NONE	205.	205.	
HP OMNIBOOK 800 CT/M	10/31/1997	12/31/2002	NONE	4,257.	4,257.	
1.7 GB HARD DRIVE	10/03/1997	12/31/2002	NONE	100.	100.	
HP DOCKING SYSTEM	01/09/1998	12/31/2002	NONE	468.	468.	
HP NETSERVER E45 COM	03/18/1998	12/31/2002	NONE	11,028.	11,346.	-318.
PALMTOP HP620	04/14/1998	12/31/2002	NONE	984.	1,013.	-29.
DELL DIMENSION XPS	07/18/1998	12/31/2002	NONE	2,387.	2,556.	-169.
HARD DRIVE NETSERVER	01/18/1999	12/31/2002	NONE	775.	879.	-104.
OPTIMA 33.6 PCMCIA	01/01/1999	12/31/2002	NONE	161.	180.	-19.
3COM MHZ 561 V90	02/28/1999	12/31/2002	NONE	157.	180.	-23.
REX 512K PCCOMPANION	04/17/1999	12/31/2002	NONE	205.	241.	-36.
STARTECH WIRELESS CP	04/30/1999	12/31/2002	NONE	340.	400.	-60.
JORNADA 68 HH PC	06/12/1999	12/31/2002	NONE	756.	902.	-146.
STARTAC DIGITAL CP	08/31/1999	12/31/2002	NONE	305.	455.	-150.
HP NETSERVER E60	10/29/1999	12/31/2002	NONE	2,865.	3,588.	-723.
HP VECTRA VL3 32MB	10/29/1999	12/31/2002	NONE	101.	126.	-25.
HP DESKJET 340	11/12/1999	12/31/2002	NONE	271.	340.	-69.
PALM ORGANIZER	04/16/2000	12/31/2002	NONE	498.	677.	-179.
SAMSUNG CELL PHONE	05/02/2000	12/31/2002	NONE	118.	188.	-70.
AT&T PCS STARTAC	06/14/2000	12/31/2002	NONE	115.	200.	-85.
RAM UPGRADES NETSERV	01/18/2001	12/31/2002	NONE	423.	683.	-260.
HP LJ 1200 SE	09/04/2001	12/31/2002	NONE	204.	425.	-221.
NORTON PC ANYWHERE	01/31/1996	12/31/2002	NONE	628.	650.	-22.
FRONT PAGE '97	07/29/1997	12/31/2002	NONE	140.	140.	
MS WINDOWS NT SERVER	10/29/1999	12/31/2002	NONE	656.	656.	
ILLUSTRATOR 9.0 UPG	01/08/2001	12/31/2002	NONE	90.	135.	-45.
Totals						

COMMUNICATIONS CONSORTIUM MEDIA CENTER
 Supplement to Form 4797 Part I Detail

Description	Date Acquired	Date Sold	Gross Sales Price	Depreciation Allowed or Allowable	Cost or Other Basis	Gain or (Loss) for entire year
ADOBE PHOTOSHOP 7.0	01/08/2001	12/31/2002	NONE	114.	171.	-57.
EQUISIS ZETAFAK 7.0	12/06/2000	12/31/2002	NONE	401.	555.	-154
Totals						-2,984.

COMMUNICATIONS CONSORTIUM MEDIA CENTER
FORM 990 - PART IV BALANCE SHEETS, LINES 57A, B, C
2002
52-1524972

ASSET CLASSIFICATION	BEGINNING OF YEAR			CURRENT YEAR ACTIVITY				END OF YEAR		
	Cost	Accum Dep/Amort	Book Value	Purchases	Cost Dispositions	Accum Dep/Amort Dep/Amort	Dispositions	Cost	Accum Dep/Amort	Book Value
Furniture & Fixtures	52,611	34,072	18,539	2,564	138	6,019	119	55,037	39,972	15,065
Equipment	209,732	146,424	63,308	22,484	35,716	34,317	33,029	196,500	147,712	48,788
Software	17,335	8,932	8,403	659	2,307	3,967	2,029	15,687	10,870	4,817
Leasehold Improvements	473	320	153	12,245	0	2,091	0	12,718	2,411	10,307
Totals	<u>280,151</u>	<u>189,748</u>	<u>90,403</u>	<u>37,952</u>	<u>38,161</u>	<u>46,394</u>	<u>35,177</u>	<u>279,942</u>	<u>200,965</u>	<u>78,977</u>

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ File a separate application for each return

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

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

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

Note. Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only
 All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print File by the due date for filing your return. See instructions	Name of Exempt Organization COMMUNICATIONS CONSORTIUM MEDIA CENTER	Employer identification number 52-1524972
	Number, street, and room or suite no. If a P O box, see instructions 1200 NEW YORK AVENUE, NW	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions WASHINGTON, DC 20005-1754	

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 08/15, 2003, to file the exempt organization return for the organization named above. The extension is for the organization's return for calendar year 2002 or tax year beginning _____, and ending _____

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 \$ _____

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 ▶ Acciibes Title ▶ CPA Date ▶ 5-8-03

For Paperwork Reduction Act Notice, see instruction

- If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this box
- Note Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)

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

Type or print File by the extended due date for filing the return See instructions	Name of Exempt Organization COMMUNICATIONS CONSORTIUM MEDIA CENTER	Employer identification number 52-1524972
	Number, street, and room or suite no. If a P O box, see instructions 1200 NEW YORK AVENUE, NW	For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions WASHINGTON, DC 20005-1754	

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

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

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the 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 is for

4 I request an additional 3-month extension of time until 11/17/2003

5 For calendar year 2002 or other tax year beginning _____ and ending _____

6 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

7 State in detail why you need the extension ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE TAX RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions \$ _____

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ _____

c **Balance Due.** Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions \$ _____

Signature and Verification

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

Signature *AC Gilbert* Title CPA Date 8-1-03

Notice to Applicant - To Be Completed by the IRS

We have approved this application Please attach this form to the organization's return

We have not approved this application However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions) This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return Please attach this form to the organization's return

We have not approved this application After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file We are not granting a 10-day grace period

We cannot consider this application because it was filed after the due date of the return for which an extension was requested

Other _____

EXTENSION APPROVED
AUG 1 2003

Director _____ By LINDA WEISKOPF, FIELD DIRECTOR, SUBMISSION PROCESSING, OGDEN

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above

Type or print	Name GILBERT & WOLFAND, P.C.
	Number and street (include suite, room, or apt. no.) Or a P O box number 2201 WISCONSIN AVE, NW SUITE 320
	City or town, province or state, and country (including postal or ZIP code) WASHINGTON, DC 20007
	JSA 2F8055 1 000