# 990 Feet

Department of the Theasury

#### Return of Organization Exempt From Income Tax

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) nonexempt charitable trust 1999

This Form is Open to Public Inspection

Internal Revenue Service Note: The organization may have to use a copy of this return to satisfy state reporting requirements. For the 1999 calendar year, OR tax year period beginning June 30 Check if: C Name of organization Employer identification number Economic Roundtable Change of address. 95-4313202 Number and street (or P. O. box if mail is not delivered to street address) Room/suite Telephone number Initial return 315 West 9th Street, Suite 1209 Final return 213-892-8104 City or town State or Country ZIP code Amended return Check if exemption Los Angeles, CA 90015 application is pending (required also for State reporting) G Type of organization X Exempt under section 501(c)( 3 )(insert no.) section 4947(a)(1) nonexempt charitable trust Note: Section 501(o)(3) exempt organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Sch. A (Form 990), H(a) Is this a group return filed for affiliates? Yes or No If either box in H is checked "Yes," enter four-digit group exemption number (GEN) (b) If "Yes," onter the number of affiliates for which this return is filed: J Accounting X Cash Accrual method: Other (specify) (C) is this a separate return filed by an organization covered by a group ruling? 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 it received a Form 990 Package. in the mail, it should file a return without financial data. Some states require a complete return. Note: Form 990-EZ may be used by organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at end of year. Revenue, Expenses, and Changes in Net Assets or Fund Balances Contributions, gifts, grants, and similar amounts received: a Direct public support 1a 78,301 118,555 c Government contributions (grants) d Total (add lines 1a through 1c) (attach schedule of contributors) 196,856 (cash \$ 196,856 noncash \$ 1d 2 Program service revenue including government fees and contracts (from Part VII, line 93) . . . . 2 3 Membership dues and assessments 3 4 5 Dividends and Interest from securities 5 R c Net rental income or (loss) (subtract line 6b from line 6a) . 0 融 7 Other investment income (describe Ba Gross amount from sales of assets other (B) Other (A) Securities e 88 n 8b b Less: cost or other basis and sales expenses . . . . . . u 0 8c 0 0 d Net gain or (loss) (combine line 8c, columns (A) and (B)) Bd. 9 Special events and activities (attach schedule) a Gross revenue (not including \$ b Less: direct expenses other than fundraising expenses . . . . . . c Net income or (loss) from special events (subtract line 9b from line 9a) . . . 10a Gross sales of inventory, less returns and allowances 10a C Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) . . . . 0 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) 12 196,856 194,306 13 21,225 14 Ex-14 Management and general (from line 44, column (C)) 15 Fundraising (from line 44, column (D)) 15 0 pen-16 Payments to affiliates (attach schedule) . . . 16 ses 17 Total expenses (add lines 16 and 44, column (A)) 17 215,531 18 -18.67519 44,919 19 Net assets or fund balances at beginning of year (from line 73, column (A)) Net 20 20 Other changes in net assets or fund balances (attach explanation) . . . . . Assets 26,244 21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)

Other program services (attack schedule)

1 Total of Program Service Expenses (should equal line 44, column (B), Program services)

194,306

Form 990 (1999)

Form 990 (1999) Economic Roundtable 95-4313202 Page 2 Part II Statement of All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) propolizations Functional Expenses and section 4947(a)(1) convermed charitable trusts, but optional for others. (See Specific Instructions on page 19.) Do not include amounts reported on line (A) Total (B) Program (C) Management (D) Fundraising 6b, 8b, 9b, 10b, or 16 of Part I. services and general 22 Grants and allocations (attach schedule) (cash s noncash \$ 22 23 Specific assistance to individuals (attach schedule) 23 0 24 Benefits paid to or for members (attach schedule) . 24 0 25 Compensation of officers, directors, etc. . . . 25 72.000 64.800 7,200 26 27.760 24.984 2,776 13,478 12,130 1,348 1,504 28 Other employee benefits . . . . . . . 1,354 150 8,674 7.807 867 30 Professional fundraising fees 0 31 Accounting fees 31 740 740 0 6.080 5.472 608 34 2,277 2.049 228 514 463 51 7,415 6.674 741 Equipment rental and maintenance . . . 200 180 37 20 8,405 38 Printing and publications . . . . 9.339 934 39 13,330 39 Travel 11,997 1,333 2,316 40 Conferences, conventions, and meetings . . . . 1,158 1,158 41 41 Interest 0 42 Depreciation, depletion, etc. (attach schedule) . . . 42 0 43 Other expenses (itemize) a Insurance 3,978 1.989 1.989 b Dues and publications 8.687 7.818 869 c Consultants 36,813 36,813 0 d Miscellaneous 43d 426 213 213 0 43e 43f Total functional expenses (add lines 22 through 43). Organizations completing columns (B) - (D), carry 44 215,531 194,306 21,225 these totals to lines 13 - 15 Reporting of Joint Costs. Did you report in column (B) (Program services) any joint costs from a combined X No If "Yes," enter (i) the aggregate amount of these joint costs ; (ii) the amount allocated to Program services , (iv) the amount allocated to Fundraising (iii) the amount allocated to Management and general Part III Statement of Program Service Accomplishments (See Specific Instructions on page 22.) Program Service Economic research What is the organization's primary exempt purpose? Expenses All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number (Required for 501(c)(3) and of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) (4) orgs., and 4947(a)(1) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and trusts; but optional for allocations to others.) Research to develop practical solutions to social and economic problems in such areas as the impact of defense cutbacks, industrial diversification in the aerospace industry, database for air quality strategies and labor market information. 194.306 (Grants and allocations \$ (Grants and allocations \$

(Grants and allocations \$

Form	n 990 (1999)	Economic Roundtable		95-4313202		Page 3
Par	t IV Balance Sheets	(See Specific Instructions on page 22.)				
Not	e: Where required, attache	ed schedules and amounts within the d	escription	(A)		(B)
	column should be for er	nd-of-year amounts only.		Beginning of year		End of year
		Assets				
45	Cash - non-interest-bearing			44.657	45	26,840
46	Savings and temporary cash	investments		15	46	0
			7 7			
				4		
Ь	Less: allowance for doubtful	accounts	47b		47c	
48a	Pledges receivable	erran v masser i a america.	. 48a	1		
b	Less: allowance for doubtful	accounts	. 48b		48c	
49	Grants receivable	CARA A A CARACA A A ACADA			49	
		rectors, trustees, and key employees				
	(attach schedule)		equal a service		50	
		able (attach schedule)				
		accounts			51c	
					52	
		ed charges			53	
		ich schedule)			54	
55a	Investments - land, buildings	and equipment	55a			
h	Less: accumulated deprecia		. 554	1		
U		tion (attach	55h		55c	
56		chedule)			56	
		ent: basis			50	
		tion (attach schedule)		1	57c	0
		Rent deposit	[4,4]	516	-	516
		rough 58) (must equal line 74)		45,188		27,356
		Liabilities				
60	Accounts payable and accrue	ed expenses		269	60	1,112
61	Grants payable	CANADA CANADA CANADA	Y 10101 I V 1010		61	
62	Deferred revenue				62	
63	Loans from officers, directors	s, trustees, and key employees (attach	schedule)		63	
		attach schedule)			64a	V # 200 10 Table 2000
		ayable (attach schedule)			64b	
	Other liabilities (describe				65	
66		through 65)		269	66	1,112
2		et Assets or Fund Balances				
Org	anizations that follow SFAS		ete			
67	lines 67 through 69 and lines			*****	0.7	20.044
				44,919	68	26,244
					69	
					03	
Org	anizations that do not follow complete lines 70 through 74		and			
		or current funds			70	
	그들은 마음을 하는 것이 있다면 살이 되었다. 사람이 되었다면 가장 하는 것이 되었다면 하는 것이다. 그렇게 되었다면 하는 것이다.	land, bidg., and equipment fund			71	
		ited income, endowment, or other fund			72	
73		nces (add lines 67 through 69 OR lines				
		equal line 19 and column (B) must equal		5-55-3190		
				44,919	_	26,244
74	Total liabilities and net assets	s/fund balances (add lines 66 and 73)		45,188	74	27,356

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.

Form 990 (1999)	Economic Ro	The state of the s		95-4313202	Page
Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return	N/A » Spesific Instructions, page 24.	Audited	iation of Expens Financial States s per Return		N/A
a Total revenue, gains, and other support		a Total expense and			
per audited financial statements	a	financial statement	5		a
b Amounts included on line a but		b Amounts included	on line a but not on		
not on line 12, Form 990:		line 17, Form 990:	100		
(1) Net unrealized gains on		(1) Donated services a	nd		
investments		use of facilities	ode samuelo d		1-1
(2) Donated services and use of facilities		(2) Prior year adjustme on line 20, Form 99			
(3) Recoveries of prior		(3) Losses reported on		-	† 1
year grants		Form 990	mic 20,		
(4) Other (specify):		(4) Other (specify):			1 1
3.4					
Add amounts on lines (1) thru (4)	b 0	Add amounts on lin	es (1) thru (4)	D	b (
C Line a minus line b	c 0	C Line a minus line b			c (
d Amounts included on line 12,		d Amounts included	on line 17,		
Form 990 but not on line a:		Form 990 but not o	n line a:		
(1) Investment expenses not included on		(1) Investment expense			
line 6b, Form 990		included on line 6b,	Form 990		
(2) Other (specify):		(2) Other (specify):			
				8	
1117	-				
Add amounts on lines (1) and (2)	d 0	4			d (
Total revenue per line 12,     Form 990 (line c plus line d)	e 0	<ul> <li>Total expenses per Form 990 (line c plu</li> </ul>			e (
compensated; see Specific instruction (A) Name and address		(B) Title and average hours per week	(C) Compen- sation (if not	(D) Contributions to employee benefit plans &	(E) Expense account and other
Casid Flamina		devoted to position President -	paid, enter -0-)	deterred compensation	allowances
Daniel Flaming 1000 Grace Terrace Pasadena, CA		40 hours/week	72,000	4,320	
Paul Hunt		Chair -	12,000	4,320	
2244 Walnut Grove Avenue Rosemead, (	:A	As needed	0	0	
Jennifer Wolch		Vice Chair -			
University of Southern California Los Ang	eles, CA	As needed	0	0	C
Alex McEachern		Sec/ Treasurer -			
University of Southern California Los Ang	eles, CA	As needed	0	0	
Rosina Becerra	,	Board member -			
UCLA School of Public Policy Los Angele	s, CA	As needed	0	0	C
Stuart Gabriel		Board member -			
University of Southern California Los Ang	eles, CA	As needed	0	0	
Norman Murdoch	CA	Board member - As needed	0	0	0
342 South Irving Boulevard Los Angeles, Gordon Palmer	UA	Board member -		U	0
925 Harbor Plaza Long Beach, CA		As needed	0	0	C
Joseph Burke Roche		Board member -			
400 Hauser Boulevard Los Angeles, CA		As needed	0	0	
	****				
75 Did any officer, director, trustee, or ke \$100,000 from your organization and	all related organiz	zations, of which more	than \$10,000 wa	is	
provided by the related organizations If "Yes," attach schedule - see Specifi				Yes	X No

	1990 (1999) Economic Roundtable 95-4313202		Page 5
Par	t VI Other Information (See Specific Instructions on pages 25,)		Yes or No
76	Did the organization engage in any activity not previously reported to the Internal Revenue Service? If "Yes," attach a detailed description of each activity.	. 76	No
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	No
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered		
L	by this return?	78a	No
	If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes,"	78b	N/A
	attach a statement	79	No
80a	Is the organization related (other than by association with a statewide or nationwide organization)		
	through common membership, governing hodies, trustees, officers, etc., to any other exempt or		
_	nonexempt organization?	80a	No
D	If "Yes," enter the name of the organization		
A1a	and check whether it isexempt ORnonexempt.  Enter the amount of political expenditures, direct or indirect, as described		
V 1 G	in the instructions for line 81		
b	Did the organization file Form 1120-POL for this year?	81b	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at		
	no charge or at substantially less than fair rental value?	. 82a	Yes
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 for reporting in Part III.)		
B3a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	Yes
	Did the organization comply with the disclosure requirements relating to guid pro quo contributions?	83b	Yes
	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	No
b	If "Yes," did the organization include with every solicitation an express statement that such		
~~	contributions or gifts were not tax deductible?	84b	N/A
	Section 501(a)(4), (5), or (6) organizations (a) Were substantially all dues nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85a 85b	N/A N/A
Ь	If "Yes" to either 85a or 85b, do not complete 85c through 85h below unless the organization	030	N/A
	received a waiver for proxy tax owed for the prior year.		
C	Dues, assessments, and similar amounts from members		
	Section 162(e) lobbying and political expenditures		
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	1	
	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85g	No
	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount	039	INO
	in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political		
	expenditures for the following tax year?	85h	No
86	Section 501(c)(7) orgs Enter: (a) Initiation fees and capital contributions		
_	Included on line 12	-	
	Gross receipts, included on line 12, for public use of club facilities	1	
	Gross income from other sources. (Do not net amounts due or paid to other		
	sources against amounts due or received from them.)		
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		
	diaregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-37 if "Yes," complete Part IX	88	No
39a	501(c)(3) organizations - Enter. Amount of tax paid during the year under: section 4911 0; section 4912 0; section 4955		
Ь	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	88	No
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the		
-	year under section 4912, 4955 and 4958	-	0
	Enter: Amount of tax in 89c, above, reimbursed by the organization		- 0
	List the states with which a copy of this return is filed California	local	
	Number of employees employed in the pay period that includes March 12, 1999 (See inst.)  The books are in care of Daniel Flaming Telephone no.	90b	90-4721
01	The books are in care of Daniel Flaming Telephone no.  Located at 315 West 9th Street, Suite1209 Los Angeles, CA ZIP + 4	210-0	90015
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041— Check here	T-7	
26	enter the amount of tax-exempt interest received or accrued during the tax year 92		
		F	orm 990 (1999)

Form 990 (1999)	Economic Round	Itable		95-4313202	Page 6
Part VII Analysis of Income-Produc	ing Activities				ructions on pages 29.)
Enter gross amounts unless otherwise	Unrelated busi	iness income	Excluded by section:	512, 513, or 514	(E)
indicated.	(A)	(B)	(C)	(D)	Related or exempt
93 Program service revenue:	Business code	Amount	Exclusion code	Amount	function income
a					
b					
c					
d					
e					
Medicare/Medicaid payments					
9 Fees and contracts from government agencies					
94 Membership dues and assessments	353073130 == 2				
95 Interest on savings and temporary cash investment					
96 Dividends and interest from securities					
97 Net rental income (loss) from real estate;					
a debt-linenced property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sules of assets other than inventory					
101 Net Income or (loss) from special events.					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
Ь					
C					
d					
e				1	
104 Subtotal (add cols. (B), (D) and (E))		0		0	0
105 TOTAL (add line 104, columns (B), (D), and (				0	0
Part IX Information Regarding Taxa (A) Name, address, and EIN of corpor	ration,	s and Disregar (B) Percentage of ownership interest	ded Entities (C) Nature of activities	(See Specific Instru (D) Total income	uctions on page 30.) (E) End-of-year assets
Please and belief, it is true, correct, and co sign the CRANT See General Missister Here Signature of officer	mplete. Declaration of prepa		David Type or print name	Flauing	Pres dente
Preparer's	200		100000	seck if self-	Preparer's SSN or PTIN
Paid signature			7/26/2000	employed	P00009906
Preparer's Firm's name	Howard J. Levine	C.P.A.		EIN	95-3535569
Use Only (or yours)	16600 Sherman V	Way, Suite 280	I SELVENTINE CO.	Phone	818-994-5562
and address	Van Nuys, CA	300	California	ZIP + 4	91406
Annual transfer from the first					Earm 000 (1000)

#### SCHEDULE A (Form 990)

#### 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.)

OMB No. 1545-0047

1999

Department of the Treasury Must be completed by the above organizations and attached to their Form 990 or 990-EZ internal Revenue Service Name of the organization Employer identification number Economic Roundtable 95-4313202 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See page 1 of the instructions. List each one. If there are none, enter "None.") (a) Name and address of each (b) Title and average (e) Expense account (d) Contributions to employee paid more than \$50,000 (c) Compensation and other hours per week employee benefit plans & allowances devoted to position deferred compensation None Total number of other employees paid over \$50,000 Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 1 of the instructions. List each one (whether individuals or firms.) If there are none, enter "None.") (a) Name and address of each independent contractor (b) Type of service (c) Compensation paid more than \$50,000 Total number of others receiving over

\$50,000 for professional services

Schedi	ule A (Form 990) 1999	Economic Roundtable	95-4313202		P	ago 2
Part	III Statements About	Activities			Yes	
li C F	ncluding any attempt to in f "Yes," enter the total export Organizations that made a Part VI-A. Other organizations tatement giving a detailed	ganization attempted to influence national, soluence public opinion on a legislative matternous paid or incurred in connection with the election under section 501(h) by filing Formons checking "Yes," must complete Part VI-description of the lobbying activities.  ganization, either directly or indirectly, enga	r or referendum? e lobbying activities, m 5768 must complete B AND attach a	1		X
f n a	ollowing acts with any of it nembers of their families, affiliated as an officer, dire	s trustees, directors, officers, creators, key or with any taxable organization with which otor, trustee, majority owner, or principal befor property?	employees, or any such person is neficiary:			х
		50. * CO. (CO. (CO. (CO. (CO. (CO. (CO. (CO.				
Ь	ending of money or other	extension of credit?		2b		X
c F	urnishing of goods, service	es, or facilities?		2c		Х
d F	ayment of compensation	or payment or reimbursement of expenses	if more than \$1,000)?	<u>2d</u>		Х
		ncome or assets? on is "Yes, " attach a detailed statement exp		2e		Х
4a [	lo you have a section 403	e grants for scholarships, fellowships, stude b) annuity plan for your employees?		3 4a		X
		w the organization determines that individuals or org unce of its charitable programs qualify to receive pay				
Part I			e pages 2 through 4 of the instructions.)			
5	A church, convention of A school. Section 170 A hospital or a cooper. A Federal, state, or local and state. A medical research or name, city, and state. An organization operal Section 170(b)(1)(A)(i) X An organization that membership fees, and exceptions, and (2) no taxable income (less section 509(a)(2). (Als An organization that is supports organizations meet the test of section 170 per section 509(a)(b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	foundation because it is (please check only of churches, or association of churches. Se (b)(1)(A)(ii). (Also complete Part V, page 4 ative hospital service organization. Section cal government or governmental unit. Section ganization operated in conjunction with a house of the benefit of a college or university of (Also complete the Support Schedule in primally receives a substantial part of its support 170(b)(1)(A)(vi). (Also complete the Support 170(b)(A)(b)(	ction 170(b)(1)(A)(ii).  170(b)(1)(A)(iii).  on 170(b)(1)(A)(v).  spital. Section 170(b)(1)(A)(iii). En  owned or operated by a governmental Part IV-A.)  oport from a governmental unit or fro  oort Schedule in Part IV-A.)  Support Schedule below.)  its support from contributions, charitable, etc., functions- subject to is investment income and unrelated by the organization after June 30, 197  -A.)  other than foundation managers) an  or (2) section 501(c)(4), (5), or (6), in	al unit.  om the  certain business 75. See	il's	
Provid		about the supported organizations. (See p ) Name(s) of supported organization(s)		(b) Line numb from above	er	
14	An organization organ	ized and operated to test for public safety.	Section 509(a)(4), (See page 4 of the	ne instructions	.)	_

-	dule A (Form 990) 1999 Economic Rounds			90-4313202		Page 3
	IV-A Support Schedule (Complete only if you					
	E: You may use the worksheet in the instructions				- M	_
	endar year (or fiscal year beginning in)	(a) 1998	(b) 1997	(c) 1996	(d) 1995	(e) Total
15	Gifts, grants, and contributions received. (Do		202.002		600 200	
40	not include unusual grants. See line 28.)	167,908	230,638	88,269	180,859	667,674
	Membership fees received		-			.0
17	Gross receipts from admissions, merchandise					
	sold or services performed, or furnishing				63	
	of facilities in any activity that is not a business unrelated to the organization's					
	charitable, etc., purpose					0
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			iii		
	after June 30, 1975	188	486	1,217	611	2,502
19	Net income from unrelated business activities					
	not included in line 18				in the second	0
20	Tax revenues levied for the organization's benefit					
	and either paid to it or expended on its behalf				J	0
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		-			0
22	Other income. Attach a schedule. Do not include					1 .
22	gain or (loss) from sale of capital assets	400.000	224 424	00 400	404 470	0 070 470
23	Total of lines 15 through 22	168,096 168,096	231,124	89,486 89,486	181,470	670,176
26	Line 23 minus line 17	1,681	2,311	895	181,470	670,176
	Organizations described in lines 10 or 11:		er 2% of amount i			a 13,404
	Attach a list (which is not open to public inspection				per constant	13,404
D	each person (other than a governmental unit or pu					
	1995 through 1998 exceeded the amount shown in				nts 26t	60,608
	1990 till ough 1990 excessed the attout shown in	it lille 20a. Lille	i die suili ei all the	ose excess amou	113	00,000
6	Total support for section 509(a)(1) test: Enter line	24 column (e)			260	670,176
	그리고 하는 사람들은 사람들이 가는 사람들이 되었다. 그는 사람들이 아니는 사람들이 가는 사람들이 가지 않는 사람들이 되었다.	2,502 19			200	010,110
	등 [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	0 26b			260	63,110
e	Public support (line 26c minus line 26d total)					
f	Public support percentage (line 26e (numerato	r) divided by lin	ne 26c (denomina	itor))	261	
			luded on lines 15,			
	"disqualified person," attach a list to show the nam					
	person." Enter the sum of such amounts for each	year:				
	(1998) (1997) For any amount included in line 17 that was received		(1996)		(1995)	
b	For any amount included in line 17 that was received	ved from a nond	isqualified person,	attach a list to si	row the name of	and
	amount received for each year, that was more tha	n the larger of (1	I) the amount on I	ne 25 for the yea	r or (2) \$5,000.	
	(Include in the list organizations described in lines					
	between the amount received and the larger amou	int described in i	(1) or (2), enter the	sum of all these	differences (the	
	excess amounts) for each year:		100,000,000		00000000000	
	(1998) (1997)	*********	(1996)		(1995)	
		102				
C	Add: Amounts from column (e) for lines: 15	16			laz.	.1
	1720	d line 27h tetal			270	4
a	Add: Line 2/a total and	d line 2/b total			270	1
e	Public support (line 27c milius line 27d total)				216	
	Total support for section 509(a)(2) test: Enter am					
	Public support percentage (line 27e (numerato					
	Investment Income percentage (line 18, column (e) (nu					1
20	Unusual Grants: For an organization described in line					
	attach a list (which is not open to public inspection) for each grant, and a brief description of the nature of the grant. Do					
_	grant, and a oner description of the nature of the grant. Do	Hot Michage Tusse D	panta in inte 15, 1566	page a ut the matru	Schedule A /f	Form 990) 1999
					maria manufactura (1)	The state of the state of

			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		1
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	Personne	*/*CU00086
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?	31		*********
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
		1		
		0.000000		
		2000000		
32	Does the organization maintain the following:			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	areasses.	ESSENSES
	Records documenting that scholarships and other financial assistance are awarded on a racially	JEH	_	
	nondiscriminatory basis?	32b		
	Copies of all catalogues, brochures, announcements, and other written communications to the public	320	_	-
-	dealing with student admissions, programs, and scholarships?	32c		
a	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.)	320		
	20 1 # 0 1 10 2 1 10 10 10 10 10 10 10 10 10 10 10 10 1			
		-		
33	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	33a		
Ь	Admissions policies?	33b		
		02.1		
G	Employment of faculty or administrative staff?	33c		<del>}</del>
d	Scholarships or other financial assistance?	33d	_	-
е	Educational policies?	33e		<u> </u>
f	Use of facilities?	33f		
9	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 statement.)			
	***************************************			
	***************************************			
	***************************************			
4a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
L	Has the organization's right to such aid ever been revoked or suspended?	34Ь		
U	If you answered "Yes" to either 34a or b, please explain using an attached statement.	940		
	if you answered it as to either and on a, prease explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			N.
	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial pendiscrimination? If "No." attach an explanation	35		

					and the same of th	95-4313202			Page 5
Par	t VI-A	Lobbying E	xpenditures by Ele	cting Public Char	rities		(See pag	e 6 of the ins	tructions.)
		(To be complete	d ONLY by an eligible orga-	nization that filed Form 5	5768)				
Che	ck here	а	If the organization	belongs to an affilial	ted group.				
Che	ck here	ь	If you checked "a"	and "limited control"	provisions :	apply.			
		A Lobbying Expenditures by Electing Public Charities  (To be completed ONLY by an eligible organization that filed Form 5769)  re			(a)	(b)			
								Affiliated	To be completed for
_								group totals	ALL organizations
36			이번 경기를 하고 하는데 이번에 가지 않는데 그리는데 보고 있다면 되었다.	1.00			-		
37							37	0	
39								U	0
40								0	0
						9 1 1 5 19			
						mount is -			
	Not over	\$500,000		20% of the amount of	on line 40				
							41	0	0
42								0	0
43			[ [ ] [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [ [					0	
44							The state of the s	0	
	Caution	n: If there is a	n amount on either line	43 or line 44, file Fo	orm 4720.				
				Lobb	ying Expen	ditures During	4-Year Av	eraging Per	iod
	Calend	lar year (or fi	scal	(a)	(b)	(c)		(d)	(e)
	year be	eginning in)		1999	1998	1997		1996	Total
45	Lobbyii	ng nontaxable	amount						0
46	Labbuing	toucour amount	(15094 of line (5(e))						0
40	LODDYING	Cessing amount	(130% of line 43(8))						0
47	Total lo	bbying expend	ditures						0
48	Grassr	oots nontaxab	le amount					00000000000000000000000000000000000000	0
			PROPERTY NAMED						
49	Grassro	ets ceiling amour	it (150% of line 48(e))						0
50	Grassr	oots lobbying	expenditures						0
				ing Public Chariti	es				
		(For reporting	g by organizations that	did not complete Pa	irt VI-A) (See	e page 8 of the I	nstructions	5.)	
	-					ling			
			opinion on a legislative mat	ter or referendum, throug	gh the use of:		Yes No	Am	ount
a			A distribute accommon Main Inc.	er er er er er er er er	on a Showanh h		X		
b		얼마님이 아이지 않는데 그 나를하다.					X		
d							X		
e							X		
f							X		
g		1000-17-17-18-00-00-00-0 <del>7-</del> 01-19-			ve body		X		
h			minus, conventions, speeche				X		
1	Total lo	bbying expend	ditures (add lines c thro	ough h)	$\star \times \star \star$				0
	IF "Vee"	to any of the	above, also attach a st	atement giving a det	ailed descrip	ation of the labb	vina activit	ies	

	(Louin 880) 1888		Economic Round		93°4313202		Pag	ge 6
Part VII					ons and Relationships With			
es Did	Noncharitable				(See page 8 of the instructions.) of the following with any other organization descri-	e and the		
					ions) or in section 527, relating to political organization			
			ation to a noncharit			zations?	Yes	li fina
					pt organization of	51a(i)		X
								X
	er transactions:					a(ii)		^
		ges of assets w	ith a noncharitable	exempt or	ganization	b(i)		X
					on	b(ii)		X
						b(iii)		X
						b(iv)		X
					KIND FROM BUILDING			X
					tations			X
c Sha	ring of facilities, e	quipment, mail	ing lists, other asso	ets, or paid	i employees			X
d If th	e answer to any o	f the above is "	Yes," complete the	following:	schedule. Column (b) should always show			
					by the reporting organization. If the			
orga	anization received	less than fair n	narket value in any	transactio	n or sharing arrangement, show in column			
(d) t	he value of the go	ods, other ass	ets, or services rec	eived.				
(a)	(b)		(c)		(d)			
Line no.	Amount involved	Name of none	charitable exempt orga	nization	Description of transfers, transactions, and sharing	arrangem	ents	
								_
								_
								_
								_
								_
							_	
								_
desc	cribed in section 5 es," complete the	01(c) of the Co	de (other than sect		, one or more tax-exempt organizations (3)) or in section 527?	Yes [	X	40
	(a) Name of organiza	ation	Type of organi	zation	Description of relationship			
	realité of organie	ation	Type or organi	Lunon	Beeding of Condensity			_
-								_
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							135	
				2000				
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								_
								1015
								_
					Schedul	e A (Form	990) 15	399

Name as shown on return Economic Roundtable	ID number 95-4313202
STATEMENT #1 - CONTRIBUTIONS OVER \$5,000 (Not open to public inspection)	
City of Gardena	10,000
City of Santa Monica	26,974
Haynes Foundation	51,543
Metropolitan Transit Authority	45,016
St. Joseph Family Center	20,000
United States Air Force	33,664
TOTAL CONTRIBUTIONS OVER \$5,000	187,197
TOTAL CONTRIBUTIONS OF \$5,000 OR LESS	9,659
TOTAL CONTRIBUTIONS	196,856

### STATEMENT #2 - EXCESS CONTRIBUTIONS (Not open to public inspection)

	Total		
	contributed	2% Base	Excess
Arco Foundation	41,000	13,404	27,596
Haynes Foundation	44,820	13,404	31,416
Liberty Hill Foundation	15,000	13,404	1,596
TOTALS	100,820	40,212	60,608

## California Exempt Organization

1999

### **Annual Information Return**

For calendar year or	r fiscal year beginning	July	day 1	year 1999, and end	_	June	30	year 2000.	
	IMPORTANT: Your			A Final return?	_	Yes. If yes check as	d eldusilat	roir. No	X
California corpo	pration number	FEIN		<ul> <li>Dissolved</li> </ul>		Withdrawn	M	erged/	
1492728		95-4313202		If checked, enter d	ate *		R	eorganized	
	Attach Presdo or See Ins			B Check forms 109 Federal: 990T 1120H C # grassization is	X	15 year:  100 [ ]990 [ ]990PF [ ]1120	99	00S 00EZ 141	utile
	ganization name Roundtable			charity, religious	organiza	tion, or is controlled by	r a religiou	is operation,	NO.
Address			MB no.	D is this a group fil	ing7 See	Gen. Instruct, M.		Yes No	Х
	9th Street, Suite 120		ZIP code	E Accounting matt			escares e		
City Los Angele	es, CA 90015	State	ZIF code	F Type of organization	L <sub>x</sub>	Exempt under Section IRC Section 4947		The state of the state of the state of	0
Part I Com	plete Part I unles	s not required to	file this form	. See General Ir	struc	tions B and	C.		
		r receipts from othe				0	1	0	
	2 Gross dues a	nd assessments fro	m members and	affiliates	100		2	0	
Receipts		ons, giffs, grants, and s					3	196,856	
and		ceipts for filing requ							
Revenues		T BE COMPLETED.					4	196,856	
(Attach check		sold			5				
th worsel.		basis and sales exp			6		-		
order here.)		Add line 5 and line 6				50 50 5 5 F	7	100.000	
		come. Subtract line		Dort II line 48	-	* 19 * 4 * 4	8	196,856	
Expenses		s and disbursement ts over expenses and d					9	215,531 -18,675	
Cillan		or \$25. See Gener					15-1	10	
Filing Fee	The state of the s	lure to file on time.				12			
	13 Balance due.	Add line 11 and line	12	the state of the state of		13		10	
political ca election un and attach 15 Did the org of incorpor If "yes," co 16 is the orga If "yes," er 17 Did the org If "yes," en	under R&TC Section impaign or (2) attempted R&TC Section 2: form FTB 3509, Poliganization have any cration, or bylaws that implete an explanation fization exempt under amount of gross panization file Form 1 ter amount of total in a sare in care of 315 West 9th Street	oted to influence leg 3704.5 (relating to legislative a changes in its activity have not been report on and attach copies or R&TC Section 23 receipts from nontration. Form 100S or form become reported.	islation or any beobying by publicativities by Secties, governing in the francis of revised docu 701g? Thember sources form 109 to repose	allot measure, or (s c charities)? If yes tion 23701d Organi estrument, articles chise Tax Board? ments	3) mad , com zation	de an oplete		es No es No es No es No 3-390-47	X X X X X 21
Please Sign	Under penalties of periury, I to belief, it is true, correct, and a	fectore that I have examined to complete, Declaration of prep						ge and	
Here	<b>&gt;</b>								
11616	Signature of officer		Da	te Title		-	Javtime	telephone	
	Preparer's	7 7	Date	Check if		Preparer's socia	ALCOHOLD STATE		
Paid	signature		7/26/20	A STATE OF THE PARTY OF THE PAR	X	P00009906			
	-ignatus	Howard I Laulas (		- Indialas	-		95-3535	SEG	
Preparer's	Firm's name	Howard J. Levine C			_	95-3535569	20-2030	303	
Use Only	(or yours, if soli-	16600 Sherman W Van Nuys, CA 914			P		119.00	4-5562	-
	employed) and address	van Huys, On 314			LENSY	me telephone	10-00	- VUUL	

Economic Roundtable 95-4313202 Part II. Organizations with gross receipts of more than \$25,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information. See Specific Line Instructions. Gross sales or receipts from all business activities. See instructions page 3 2 Interest 2 Receipts 3 Dividends . . 3 4 Gross rents . . from 4 5 Gross royalties Other 5 Sources 6 Gross amount received from sale of assets . 6 7 8 TOTAL gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1 8 Contributions, gifts, grants, and similar amounts paid. Attach schedule . . . . . . Form 990 9 10 Page 2 11 Compensation of officers, directors and trustees. Attach schedule . . (attached) Expenses 12 and 13 14 Taxes . . Disburse-ments 15 16 Depreciation and depletion . . . 16 17 Other, Attach schedule 17 18 TOTAL expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9 18 215,531. Schedule L **Balance Sheets** Beginning of income year End of income year Assets (c) (d) 1 Cash . . . . . 44.672 26,840. 2 Net accounts receivable . . . . Net notes receivable. Attach schedule . . . Inventories Federal and state government obligations . . . 5 6 Investments in other bonds. Attach schedule . . . 7 Investments in stock. Attach schedule . . . . Mortgage loans (number of loans 8 Other investments. Attach schedule . . . . . 5,221. 5.221 b Less accumulated depreciation 5,221. ) 0 5,221.) O. 12 Other assets. Attach schedule . . Rent deposit 516. 516. 45.188. 27,356. 13 Total assets Liabilities and net worth 269 1,112 15 Contributions, gifts, or grants payable . . . . Bonds and notes payable. Attach schedule . . . 18 Other liabilities. Attach schedule . . . . . . 19 Capital stock or principle fund . . . . . . . 20 Paid-in or capital surplus. Attach reconciliation . 26,244 21 Retained earnings or income fund . . . . . . 44,919. 22 Total liabilities and net worth . 45,188. Reconciliation of income per books with income per return Schedule M-1 Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$25,000. -18,675. 7 Income recorded on books this year not included in this return. Excess of capital losses over capital gains 8 Deductions in this return not Income not recorded on books this year. Attach schedule charged against book income this year. Attach schedule . . . . Expenses recorded on books this year not 9 Total. Add line 7 and line 8 . . . deducted in this return. Attach schedule 10 Net income per return. -18,675-18,675 Add line 1 through line 5 Subtract line 9 from line 6