

Return of Organization Exempt From Income Tax

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

Department of the Treasury
Internal Revenue Service

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

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

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization GEORGE MASON UNIVERSITY FOUNDATION, INC.		D Employer identification number 54-1603842
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 4400 UNIVERSITY DRIVE, MASON HALL D201		E Telephone number (703)993-8850
		City or town, state or country, and ZIP + 4 FAIRFAX, VA 22030-4444		F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶

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

Hand I are not applicable to section 527 organizations.

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

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

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

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

G Web site: ▶ WWW.GMU.EDU/DEVELOPMENT/GMUFOUND

J Organization type (check only one) 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527

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

I Enter 4-digit GEN ▶

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **44,257,480.**

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

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

Revenue	1	Contributions, gifts, grants, and similar amounts received:			
	a	Direct public support	1a	14,352,359.	
	b	Indirect public support	1b		
	c	Government contributions (grants)	1c		
	d	Total (add lines 1a through 1c) (cash \$ 13,607,167. noncash \$ 745,192.)	1d	14,352,359.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	1,047,754.	
	3	Membership dues and assessments	3		
	4	Interest on savings and temporary cash investments	4		
	5	Dividends and interest from securities	5	1,645,858.	
	6a	Gross rents SEE STATEMENT 1	6a	2,000.	
	b	Less: rental expenses SEE STATEMENT 2	6b	8,932.	
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	<6,932.>	
7	Other investment income (describe ▶ SERVICE FEES)	7	<222,065.>		
Revenue	8a	Gross amount from sale of assets other than inventory			
		(A) Securities	8a	1,577,000.	
		(B) Other	8b	1,852,276.	
		Less: cost or other basis and sales expenses	8c	<275,276.>	
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8d	<2,881,778.>		
Revenue	9a	Special events and activities (attach schedule)			
		Gross revenue (not including \$ of contributions reported on line 1a)	9a		
		Less: direct expenses other than fundraising expenses	9b		
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
Revenue	10a	Gross sales of inventory, less returns and allowances			
		Less: cost of goods sold	10b		
		Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		
11	Other revenue (from Part VII, line 103)	11	262,040.		
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	14,197,236.		
Expenses	13	Program services (from line 44, column (B))	13	13,560,048.	
	14	Management and general (from line 44, column (C))	14	1,665,512.	
	15	Fundraising (from line 44, column (D))	15	761,265.	
	16	Payments to affiliates (attach schedule)	16		
	17	Total expenses (add lines 16 and 44, column (A))	17	15,986,825.	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	<1,789,589.>	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	66,694,540.	
	20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 5	20	3,244,672.	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	68,149,623.	

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. Page 2

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)				
	cash \$ _____ noncash \$ _____	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25	0.	0.	0.
26	Other salaries and wages	26			
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29			
30	Professional fundraising fees	30			
31	Accounting fees	31	38,583.	38,583.	
32	Legal fees	32	3,977.	3,977.	
33	Supplies	33			
34	Telephone	34			
35	Postage and shipping	35			
36	Occupancy	36			
37	Equipment rental and maintenance	37			
38	Printing and publications	38			
39	Travel	39			
40	Conferences, conventions, and meetings	40			
41	Interest	41	274,303.	274,303.	
42	Depreciation, depletion, etc. (attach schedule) ...	42	383,834.	383,834.	
43	Other expenses not covered above (itemize):				
a	_____	43a			
b	_____	43b			
c	_____	43c			
d	_____	43d			
e	SEE STATEMENT 6	43e	15,286,128.	964,815.	761,265.
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	15,986,825.	13,560,048.	1,665,512.

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____.

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? SEE STATEMENT 7		Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
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.)		
a	SEE STATEMENT 8	
	(Grants and allocations \$ _____)	13,560,048.
b		
	(Grants and allocations \$ _____)	
c		
	(Grants and allocations \$ _____)	
d		
	(Grants and allocations \$ _____)	
e	Other program services (attach schedule)	(Grants and allocations \$ _____)
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	13,560,048.

Part IV Balance Sheets

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

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing	169,577.	118,584.
	46 Savings and temporary cash investments	1,077,350.	2,246,047.
	47 a Accounts receivable		
	b Less: allowance for doubtful accounts		
	48 a Pledges receivable	7,417,469.	
	b Less: allowance for doubtful accounts		
	49 Grants receivable		
	50 Receivables from officers, directors, trustees, and key employees		
	51 a Other notes and loans receivable		
	b Less: allowance for doubtful accounts		
	52 Inventories for sale or use		
	53 Prepaid expenses and deferred charges		
	54 Investments - securities STMT 9 STMT 10 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	56,600,406.	58,874,904.
	55 a Investments - land, buildings, and equipment: basis		
	b Less: accumulated depreciation	9,082,344.	
	56 Investments - other	572,567.	572,567.
	57 a Land, buildings, and equipment: basis	34,789,975.	
	b Less: accumulated depreciation STMT 12	5,214,654.	
	58 Other assets (describe ▶ SEE STATEMENT 13)	1,473,659.	1,258,191.
59 Total assets (add lines 45 through 58) (must equal line 74)	94,571,948.	100,063,083.	
Liabilities	60 Accounts payable and accrued expenses	1,670,918.	2,276,279.
	61 Grants payable		
	62 Deferred revenue	3,671,914.	3,409,779.
	63 Loans from officers, directors, trustees, and key employees		
	64 a Tax-exempt bond liabilities		
	b Mortgages and other notes payable STMT 14	18,978,413.	22,678,611.
	65 Other liabilities (describe ▶ SEE STATEMENT 15)	3,556,163.	3,548,791.
66 Total liabilities (add lines 60 through 65)	27,877,408.	31,913,460.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted	4,126,042.	4,421,929.
	68 Temporarily restricted	32,849,424.	31,845,671.
	69 Permanently restricted	29,719,074.	31,882,023.
	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		
	71 Paid-in or capital surplus, or land, building, and equipment fund		
	72 Retained earnings, endowment, accumulated income, or other funds		
	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)	66,694,540.	68,149,623.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)	94,571,948.	100,063,083.

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

Part VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		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?	X	
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?	X	
b	If "Yes," enter the name of the organization GEORGE MASON UNIVERSITY and check whether it is <input checked="" type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions	81a	0.
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b	N/A
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount 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) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <u>0.</u> ; section 4912 <u>0.</u> ; section 4955 <u>0.</u>		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
90 a	List the states with which a copy of this return is filed VIRGINIA		
b	Number of employees employed in the pay period that includes March 12, 2002	90b	0
91	The books are in care of THE FOUNDATION Telephone no. 703-993-8850 Located at 4400 UNIVERSITY DRIVE, FAIRFAX, VIRGINIA ZIP + 4 23030-4444		
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	92	N/A

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
Note: Enter gross amounts unless otherwise indicated.					
93 Program service revenue:					
a RENTAL INCOME FROM GMU			16	1,047,754.	
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					
96 Dividends and interest from securities			14	1,645,858.	
97 Net rental income or (loss) from real estate:					
a debt-financed property	531120	<6,932.>			
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income			14	<222,065.>	
100 Gain or (loss) from sales of assets other than inventory			18	<2,881,778.>	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a TRUST INCOME					170,194.
b OTHER INCOME					90,646.
c ROYALTIES			15	1,200.	
d					
e					
104 Subtotal (add columns (B), (D), and (E))		<6,932.>		<409,031.>	260,840.
105 Total (add line 104, columns (B), (D), and (E))					<155,123.>

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).
103A	INCOME FROM RETIREMENT ANNUITIES
103B	MISCELLANEOUS INCOME FROM ACTIVITIES THAT PROMOTE THE UNIVERSITY
103C	ROYALTY INCOME

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
SEE STATEMENT 21	%			
	%			
	%			
	%			

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

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

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

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

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer: _____ Date: _____ Type or print name and title: _____

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed: Preparer's SSN or PTIN: _____

Firm's name (or yours if self-employed), address, and ZIP + 4: **HOFFMAN, FITZGERALD & SNYDER, P.C.**
7900 WESTPARK DRIVE, SUITE 720
MCLEAN, VA 22102

EIN: _____ Phone no.: **(703) 847-4600**

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

GEORGE MASON UNIVERSITY FOUNDATION, INC.

Employer identification number

54 1603842

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
THE ORR COMPANY, INC. 3112 FAIRVIEW PARK DRIVE, FALLS CHURCH, VA 22042	CONSULTANTS	713,682.
CENTURY PROJECT MANAGEMENT, LTD 1980 POST OAK BLVD. SUITE 1200, HOUSTON, TX 77056	DEVELOPMENT MANAGER	1435947.
MCGUIRE WOODS, LLP 901 EAST CARY STREET, RICHMOND, VA 23219-4030	LEGAL SERVICES	90,438.
PATTON-BOGGS, LLP 2550 MAIN ST, NW, WASHINGTON, DC 20037-1350	CONSULTANTS	180,000.
HOFFMAN, FITZGERALD & SNYDER 7900 WESTPARK DR., MCLEAN, VA 22102	AUDITORS	50,255.
Total number of others receiving over \$50,000 for professional services	0	

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

Yes No

1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
		1		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.) SEE STATEMENT 22			
a	Sale, exchange, or leasing of property?	2a	X	
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c	X	
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X	
e	Transfer of any part of its income or assets?	2e		X
3	Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)	3		X
4	Do you have a section 403(b) annuity plan for your employees?	4		X
Note: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments. SEE STATEMENT 23				

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

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

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

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

14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	17,318,351.	18,840,877.	10,604,079.	10,810,579.	57,573,886.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	3,170,998.	4,163,928.	529,378.	308,053.	8,172,357.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	74,768.	446,403.	SEE STATEMENT 24 363,773.	365,545.	1,250,489.
23 Total of lines 15 through 22	20,564,117.	23,451,208.	11,497,230.	11,484,177.	66,996,732.
24 Line 23 minus line 17	20,564,117.	23,451,208.	11,497,230.	11,484,177.	66,996,732.
25 Enter 1% of line 23	205,641.	234,512.	114,972.	114,842.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 1,339,935.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the sum of all these excess amounts					26b 15,423,597.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 66,996,732.
d Add: Amounts from column (e) for lines: 18 8,172,357. 19 22 1,250,489. 26b 15,423,597.					26d 24,846,443.
e Public support (line 26c minus line 26d total)					26e 42,150,289.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 62.9139%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A					
(2001) (2000) (1999) (1998)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A					
(2001) (2000) (1999) (1998)					
c Add: Amounts from column (e) for lines: 15 16 17 20 21					27c N/A
d Add: Line 27a total and line 27b total					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

NONE

Part V Private School Questionnaire (See page 7 of the instructions.) N/A
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

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

32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	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.)			

34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended?	34b	
If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table -			
If the amount on line 40 is -	The lobbying nontaxable amount is -		
Not over \$500,000	20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	41	
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		
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.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.) N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h .)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h .)			0.

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

FORM 990 RENTAL INCOME STATEMENT 1

KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
3434, 3426, 3422 & 3444 N. WASHINGTON BLVD, ARLINGTON, VIRGINIA	1	2,000.
TOTAL TO FORM 990, PART I, LINE 6A		2,000.

FORM 990 RENTAL EXPENSES STATEMENT 2

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
OTHER RENTAL EXPENSES		4,152.	
LEASE ATTORNEY		4,780.	
- SUBTOTAL -	1		8,932.
TOTAL TO FORM 990, PART I, LINE 6B			8,932.

FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 3

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
SECURITIES	25,592,534.	28,199,036.	0.	<2,606,502.>
TO FORM 990, PART I, LINE 8	25,592,534.	28,199,036.	0.	<2,606,502.>

FORM 990 GAIN (LOSS) FROM SALE OF OTHER ASSETS STATEMENT 4

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
CONDO	12/19/01	12/24/02	PURCHASED	
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
	1,577,000.	1,740,000.	112,276.	0. <275,276.>
TO FM 990, PART I, LN 8	1,577,000.	1,740,000.	112,276.	0. <275,276.>

FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 5

DESCRIPTION	AMOUNT
UNREALIZED GAIN ON INVESTMENTS - UNRESTRICTED NET ASSETS	595,712.
UNREALIZED LOSS ON INVESTMENTS - TEMPORARILY RESTRICTED NET ASSETS	2,514,707.
CHANGE IN SPLIT INTEREST AGREEMENTS - TEMPORARILY RESTRICTED NET ASSETS	66,116.
CHANGE IN SPLIT INTEREST AGREEMENTS - PERMANENTLY RESTRICTED NET ASSETS	<121,863.>
UNREALIZED LOSS ON INVESTMENTS REALIZED ON 990 - SALE OF CONDO	190,000.
TOTAL TO FORM 990, PART I, LINE 20	3,244,672.

FORM 990 OTHER EXPENSES STATEMENT 6

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
ADMINISTRATIVE EXPENSES	890,938.		890,938.	
FUNDRAISING EXPENSES	761,265.			761,265.
INSURANCE	73,877.		73,877.	
SCHOLARSHIPS ACADEMIC PROGRAM SUPPORT	1,460,450.	1,460,450.		
UNIVERSITY INITIATIVES	11,509,119.	11,509,119.		
	58,299.	58,299.		

ADMINISTRATIVE SUPPORT	205,447.	205,447.		
FEDERAL RELATIONS	181,843.	181,843.		
UNIVERSITY SUPPORT	57,508.	57,508.		
ANNUITY BENEFIT CONTRIBUTION	87,382.	87,382.		
TOTAL TO FM 990, LN 43	15,286,128.	13,560,048.	964,815.	761,265.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 7
PART III

EXPLANATION

TO PROMOTE THE ADVANCEMENT OF GEORGE MASON UNIVERSITY BY DEVELOPING AND APPLYING FINANCIAL RESOURCES TO THE PROGRAMS OF THE UNIVERSITY

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 8

DESCRIPTION OF PROGRAM SERVICE ONE

SCHOLARSHIPS, AWARDS, REIMBURSED EXPENSES & SUPPORT EXPENSES: THE FOUNDATION'S MAJOR PROGRAM ACTIVITY IS TO DISPERSE DESIGNATED FUNDS IN SUPPORT OF SCHOLARSHIPS, FELLOWSHIPS, AWARDS & GENERAL OPERATING EXPENSES OF THE UNIVERSITY.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A		13,560,048.

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 9

SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
MUTUAL FUNDS			13066490.		13,066,490.
CORPORATE STOCKS	13,570,330.				13,570,330.
CORPORATE BONDS		13,763,315.			13,763,315.
OTHER INVESTMENTS				8,529,389.	8,529,389.
MONEY MARKET				1,950,280.	1,950,280.
TO 990, LN 54 COL B	13,570,330.	13,763,315.	13066490.	10479669.	50,879,804.

FORM 990	GOVERNMENT SECURITIES		STATEMENT 10
DESCRIPTION	U.S. GOVERNMENT	STATE AND LOCAL GOV'T	TOTAL GOV'T SECURITIES
US GOVERNMENT & AGENCY OBLIGATIONS	7,995,100.		7,995,100.
TOTAL TO FORM 990, LINE 54, COL B	7,995,100.		7,995,100.

FORM 990	OTHER INVESTMENTS		STATEMENT 11
DESCRIPTION	VALUATION METHOD	AMOUNT	
ART & ANTIQUES	COST	572,567.	
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		572,567.	

FORM 990	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT		STATEMENT 12
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
EQUIPMENT	539,593.	470,916.	68,677.
BUILDING IMPROVEMENTS	639,386.	177,191.	462,195.
BUILDINGS	8,516,787.	4,575,029.	3,941,758.
CONSTRUCTION IN PROGRESS	6,575,542.	0.	6,575,542.
LAND	18,518,667.	0.	18,518,667.
TOTAL TO FORM 990, PART IV, LN 57	34,789,975.	5,223,136.	29,566,839.

FORM 990	OTHER ASSETS		STATEMENT 13
DESCRIPTION	AMOUNT		
OTHER ASSETS	150,446.		
DEFERRED LOAN FEES	0.		
ANNUITY BENEFIT CONTRACT	908,336.		
INVESTMENT INCOME RECEIVABLE	199,409.		
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	1,258,191.		

FORM 990 OTHER NOTES AND LOANS PAYABLE STATEMENT 14

LENDER'S NAME TERMS OF REPAYMENT

FIRST VIRGINIA BANK ON DEMAND

DATE OF NOTE MATURITY DATE ORIGINAL LOAN AMOUNT INTEREST RATE

11/01/02 15,000,000. 3.50%

SECURITY PROVIDED BY BORROWER PURPOSE OF LOAN

NORTH WASHINGTON ST. LAND ARL. LAND PURCHASE FOR FUTURE UNIVERSITY DEVELOPMENT

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION FMV OF CONSIDERATION BALANCE DUE

COVENANT NOT TO ENCUMBER 13,505,413. 13,505,413.

LENDER'S NAME TERMS OF REPAYMENT

SUNTRUST BANK VARIABLE INTEREST RATE

DATE OF NOTE MATURITY DATE ORIGINAL LOAN AMOUNT INTEREST RATE

06/11/03 08/13/03 9,400,000. .00%

SECURITY PROVIDED BY BORROWER PURPOSE OF LOAN

UNIVERSITY DR & UNIVERSITY PARK PROPERTIES REFINANCE PROPERTIES USED BY UNIVERSITY AND CONSTRUCTION OF HOUSING PROJECT

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION FMV OF CONSIDERATION BALANCE DUE

COVENANT NOT TO ENCUMBER 9,173,198. 9,173,198.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B 22,678,611.

FORM 990 OTHER LIABILITIES STATEMENT 15

DESCRIPTION	AMOUNT
ACCRUED ANNUITY BENEFIT	908,336.
FUNDS HELD FOR OTHERS	2,603,548.
UNEARNED RENT	36,907.
TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B	3,548,791.

FORM 990 OTHER REVENUE NOT INCLUDED ON FORM 990 STATEMENT 16

DESCRIPTION	AMOUNT
SPLIT INTEREST AGREEMENTS - CHANGE IN VALUE	<55,747.>
TOTAL TO FORM 990, PART IV-A	<55,747.>

FORM 990 OTHER EXPENSES NOT INCLUDED ON FORM 990 STATEMENT 17

DESCRIPTION	AMOUNT
ARLINGTON RENTAL EXPENSES	8,932.
TOTAL TO FORM 990, PART IV-B	8,932.

FORM 990 OTHER REVENUE INCLUDED ON FORM 990 STATEMENT 18

DESCRIPTION	AMOUNT
ARLINGTON RENTAL EXPENSES	<8,932.>
REALIZED LOSS ON SALE OF CONDO	<190,000.>
TOTAL TO FORM 990, PART IV-A	<198,932.>

FORM 990 PART V - LIST OF OFFICERS, DIRECTORS, STATEMENT 19
 TRUSTEES AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MS. JUDITH MARSHALL JOBBITT 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	PRESIDENT 40	0.	0.	0.
DR. ALAN G. MERTEN 4400 UNIVERSITY DRIVE, MS 3A1 FAIRFAX, VA 22030-4444	TRUSTEE (PRESIDENT GMU) 40	0.	0.	0.
MR. DAVID A. ROE 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	CHIEF FINANCIAL OFFICER 40	0.	0.	0.
MS. LOVEY L. HAMMEL 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	CHAIRMAN 1	0.	0.	0.
MR. PAUL E. KYLE 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	VICE CHAIRMAN 1	0.	0.	0.
MR. JAMES W. HAZEL 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	SECRETARY 1	0.	0.	0.
MR. CARSON LEE FIFER, JR. 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. K. DAVID BOYER, JR. 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	IMMEDIATE PAST CHAIRMAN 1	0.	0.	0.
MS. LUCY C. CHURCH 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MS. KATHERINE K. CLARK 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. BERNARD H. CLINEBURG 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.

MR. OTIS D. COSTON, JR. 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MRS. BARBARA J. FRIED 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. J. HAMILTON LAMBERT 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. EARL W. STAFFORD 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. CHARLES H. SMITH, JR. 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. ROBERT CALLAHAN 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. MARK F. GRADY 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. BENJAMIN H. GRAHAM 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. GARY T. MCCOLLUM 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
THE HON. JOHN G. MILLIKEN 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
THE HON. BETTY SOUTHARD MURPHY 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. DEXTER S. ODIN 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. GEOFFREY V. PARKER 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.

DR. ROGER D. SILK 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
DR. EDWARD H. BERSOFF 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. RICKY K. BROWN 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. MICHAEL G. ANZILOTTI 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TREASURER 1	0.	0.	0.
DR. SARA COBB 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MS. CAROL WALCOFF DIXON 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
DR. MICHAEL G. FERRI 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. JAMES W. GREEN 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. EDWIN W. LYNCH, JR. 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. JUAN A. MENCIA 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.

TOTALS INCLUDED ON FORM 990, PART V

0.	0.	0.
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MR. LAWRENCE K. DOLL 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. ALBERT J. DWOSKIN 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
DR. BRUCE E. JOHNSON 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
HON. EDWIN MEESE, III 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MRS. CAROLYN PETERSON 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. ALAN L. MELTZER 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. OLZA M. NICELY 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. WILLIAM SOZA 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
DR. ERNEST VOLGENAU 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MS. D. JEAN WU 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. DONALD DELASKI 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. SIDNEY O. DEWBERRY 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.
MR. MARSHALL H. GROOM 4400 UNIVERSITY DRIVE, MS 1A3 FAIRFAX, VA 22030-4444	TRUSTEE 1	0.	0.	0.

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS STATEMENT 23
PART III, LINE 3

RECIPIENTS OF SCHOLARSHIP AND FELLOWSHIP FUNDS GENERATED BY THE FOUNDATION
ARE SELECTED BY APPROPRIATE UNIVERSITY PERSONNEL.

SCHEDULE A OTHER INCOME STATEMENT 24

DESCRIPTION	2001 AMOUNT	2000 AMOUNT	1999 AMOUNT	1998 AMOUNT
MISCELLANEOUS TRUST INCOME	15,526.	340,784.	278,328.	265,781.
	59,242.	105,619.	85,445.	99,764.
TOTAL TO SCHEDULE A, LINE 22	74,768.	446,403.	363,773.	365,545.