



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



200712

Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

2007

Department of the Treasury Internal Revenue Service

Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year may use this form. The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A For the 2007 calendar year, or tax year beginning and ending

B Check if applicable: X Address change, Name change, Initial return, Termination, Amended return, Application pending. C Name of organization: TOGETHER FOR PEACE FOUNDATION. D Employer identification number: 98-0087539. E Telephone number: 202-282-5794. F Group Exemption Number.

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

G Accounting method: X Cash, Accrual. Other (specify).

I Website: N/A

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

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

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$100,000 or more, file Form 990 instead of Form 990-EZ. \$ 35,000.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 55 of the instructions)

Table with 21 rows for Revenue, Expenses, and Net Assets. Revenue total: 35,000. Expenses total: 35,210. Net Assets total: 11,448. Includes handwritten notes like 'STMT 2' and 'BANK CHARGES AND OTHER'.

Part II Balance Sheets - If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ (See page 60 of the instructions)

Table with 7 rows for Balance Sheets. Columns: (A) Beginning of year, (B) End of year. Total assets: 11,658 to 11,448. Total liabilities: 0 to 0. Net assets: 11,658 to 11,448.

59918 VCP

SCANNED NOV 17 2010

RECEIVED OCT 19 2010 IRS OGDEN, UTAH

RECEIVED OCT 14 2010 EOCU IRS OGDEN, UTAH

<b>Part III Statement of Program Service Accomplishments</b> (See page 60 of the instructions)		<b>Expenses</b> (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)
What is the organization's primary exempt purpose? <b>SEE STATEMENT 4</b>		
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title		
28	<b>SEE STATEMENT 3</b>	
	(Grants \$ <b>35,000.</b> ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>28a</b> 35,000.
29		
	(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>29a</b>
30		
	(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>30a</b>
31	Other program services (attach schedule)	
	(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>31a</b>
32	<b>Total program service expenses</b> Add lines 28a through 31a	<b>32</b> 35,000.

<b>Part IV List of Officers, Directors, Trustees, and Key Employees</b> (List each one even if not compensated. See page 61 of the instructions)				
(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
<b>SEE STATEMENT 5</b>				

<b>Part V Other Information</b> (Note the statement requirement in General Instruction V.)		Yes	No
33	Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	<b>33</b>	X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	<b>34</b>	X
35	If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		
a	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	<b>35a</b>	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	<b>35b</b>	N/A
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	<b>36</b>	X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions <input type="checkbox"/> <b>37a</b> 0.		
b	Did the organization file Form 1120-POL for this year?	<b>37b</b>	X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	<b>38a</b>	X
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved	<b>38b</b>	N/A
39	<b>501(c)(7) organizations</b> Enter		
a	Initiation fees and capital contributions included on line 9	<b>39a</b>	N/A
b	Gross receipts, included on line 9, for public use of club facilities	<b>39b</b>	N/A

Part V Other Information (Note the statement requirement in General Instruction V) (Continued)

40a 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 0. , section 4912 0. , section 4955 0.

b 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation

c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.

d Enter amount of tax on line 40c reimbursed by the organization 0.

e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?

Table with columns Yes, No and rows 40b, 40e. 40b: Yes, No (X). 40e: Yes, No (X).

41 List the states with which a copy of this return is filed NONE

42a The books are in care of THE FOUNDATION Telephone no 06 6880 5835 Located at VIA DI MONTE GIORDANO, 36, ROME, ITALY ZIP + 4 00186

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

If "Yes," enter the name of the foreign country

See the instructions for exceptions and filing requirements for Form TD F 90-22.1

c At any time during the calendar year, did the organization maintain an office outside of the U S ?

If "Yes," enter the name of the foreign country ITALY

Table with columns Yes, No and rows 42b, 42c. 42b: Yes, No (X). 42c: Yes, No (X).

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43 N/A

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: Barry J Hart Date: 10/14/10 Type or print name and title: Barry J Hart, Asst. Secretary

Paid Preparer's Use Only Preparer's Signature: Deborah Kosruff Date: 10/14/10 Check if self-employed Preparer's SSN or PTIN: Firm's name (or yours if self-employed): TATE AND TRYON address and ZIP + 4: 805 15TH STREET, NW SUITE 900 WASHINGTON, DC 20005 EIN: Phone no: (202) 293-2200

**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 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

**2007**

Name of the organization

TOGETHER FOR PEACE FOUNDATION

Employer identification number

98 0087539

**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-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**

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

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

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**

(List each contractor who performed services other than professional services, whether individuals or firms If there are none, enter "None " See page 2 of the instructions )

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other 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		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	a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)	3a	X
b	Did the organization have a section 403(b) annuity plan for its employees?	3b	X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c	X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d	X
4	a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a	X
b	Did the organization make any taxable distributions under section 4966?	4b	
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c	
d	Enter the total number of donor advised funds owned at the end of the tax year	N/A	
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	N/A	
f	Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	0.	
g	Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year	0.	



**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) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	57,350.	85,150.	138,280.	21,606.	302,386.
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, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
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.					
23 Total of lines 15 through 22	57,350.	85,150.	138,280.	21,606.	302,386.
24 Line 23 minus line 17	57,350.	85,150.	138,280.	21,606.	302,386.
25 Enter 1% of line 23	574.	852.	1,383.	216.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 6,048.
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 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 276,588.
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c 302,386.
d Add: Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b 276,588.					26d 276,588.
e Public support (line 26c minus line 26d total)					26e 25,798.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 8.5315%
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	(2006)	(2005)	(2004)	(2003)	
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 11b, 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	(2006)	(2005)	(2004)	(2003)	
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 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

**Part V Private School Questionnaire** (See page 9 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? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )	32d	
_____			
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )	33h	
_____			
_____			
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? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b	
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 11 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		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred)			
		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 -		
	<b>If the amount on line 40 is -</b>		
	<b>The lobbying nontaxable amount is -</b>		
	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 13 of the instructions)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(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 14 of the instructions)

N/A

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

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



## SCHEDULE A - PUBLIC SUPPORT PERCENTAGE

BECAUSE THE FOUNDATION'S PERCENTAGE OF PUBLIC SUPPORT AS CALCULATED IN PART IV-A OF SCHEDULE A IS LESS THAN 33-1/3 PERCENT, WE WOULD LIKE TO PRESENT ADDITIONAL INFORMATION FOR CONSIDERATION UNDER THE 'FACTS AND CIRCUMSTANCES' TEST OF REG. SEC. 1.170A-9(F)(3):

- IT IS IMPORTANT TO NOTE THAT THE DIRECTORS OF THE ORGANIZATION ARE COMMITTED TO EXPANDING ITS ACTIVITIES AND FUNDRAISING PROCESSES.

- THE FOUNDATION'S FUNDING SOURCES EXISTING TO DATE, ALTHOUGH NOT WIDE AND VARIED, ARE NOT CONCENTRATED WITHIN A PARTICULAR FAMILY OR GROUP OF RELATED DONORS.

- THE FOUNDATION IS IN THE PROCESS OF BROADENING ITS FUNDRAISING PROGRAMS TO THE CORPORATE COMMUNITY.

- DURING THE TAX YEAR, THE FOUNDATION CARRIED ON, AND IS PLANNING, ADDITIONAL DEFINITIVE PROGRAMS IN FURTHERANCE OF ITS EXEMPT PURPOSE.

- THE FOUNDATION'S BOARD OF DIRECTORS IS DIVERSE AND IS DRAWN FROM A CROSS-SECTION OF THE GENERAL PUBLIC.

FORM 990-EZ

CASH GRANTS AND ALLOCATIONS

STATEMENT 2

CLASS OF ACTIVITY/DONEE'S NAME AND ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
GENERAL SUPPORT	UNRELATED FOREIGN CHARITY	35,000.
SEMPRE INSIEME PER LA PACE VIA DI MONTE GIORDANO, 36 00186, ROMA, ITALY		
TOTAL INCLUDED ON FORM 990-EZ, LINE 10		35,000.

STATEMENT

THE FOUNDATION HAS BEEN CREATED WITH THE PURPOSE OF WORKING FOR THE AFFIRMATION OF THE IDEALS OF PEACE AND SOLIDARITY AMONG PEOPLE. IT IS A FOUNDATION OF INTERNATIONAL CHARACTER AND ITS MISSION IS TO CARRY OUT ITS ACTIVITIES EVERYWHERE IN THE WORLD. IT PROMOTES AND PROVIDES FUNDS FOR HELP MISSIONS TO POPULATIONS STRUCK BY SERIOUS NATURAL CALAMITIES OR IN NEED OF A TANGIBLE SIGN OF SOLIDARITY.

	<u>GRANTS</u>	<u>EXPENSES</u>
TO FORM 990-EZ, LINE 28	<u>35,000.</u>	<u>35,000.</u>

FORM 990-EZ

PART III - STATEMENT OF ORGANIZATION'S  
PRIMARY EXEMPT PURPOSE

STATEMENT 4

EXPLANATION

THE FOUNDATION IS AN INTERNATIONAL ORGANIZATION INDEPENDENT OF POLITICAL IDEOLOGIES, RELIGIOUS FAITHS, OR SPECIFIC NATIONAL SITUATIONS. ITS PURPOSE IS TO WORK FOR THE AFFIRMATION OF THE IDEALS OF PEACE AND SOLIDARITY AMONG PEOPLE, AND TO PROVIDE SUPPLIES AND ASSISTANCE TO ALL PEOPLE WHO REQUEST IT, ALL OVER THE WORLD.

FORM 990-EZ

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

STATEMENT 5

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MARIAPIA FANFANI C/O WINSTON & STRAWN, 1700 K ST NW - WASHINGTON, DC 20006	PRESIDENT 1.00	0.	0.	0.
AMALIA LACROZE DE FORTABAT C/O WINSTON & STRAWN, 1700 K ST NW - WASHINGTON, DC 20006	VICE PRESIDENT 1.00	0.	0.	0.
MARIO VECCHI C/O WINSTON & STRAWN, 1700 K ST NW - WASHINGTON, DC 20006	BOARD MEMBER 1.00	0.	0.	0.
MARCELLO GIOSCIA C/O WINSTON & STRAWN, 1700 K ST NW - WASHINGTON, DC 20006	BOARD MEMBER 1.00	0.	0.	0.
FABRIZIO COLONNA C/O WINSTON & STRAWN, 1700 K ST NW - WASHINGTON, DC 20006	BOARD MEMBER 1.00	0.	0.	0.
IGNACIO DE LA MATA C/O WINSTON & STRAWN, 1700 K ST NW - WASHINGTON, DC 20006	BOARD MEMBER 1.00	0.	0.	0.
BARRY J. HART WINSTON & STRAWN, 1700 K ST NW - WASHINGTON, DC 20006	ASST SECY 1.00	0.	0.	0.
BEATRICE RANGONI MACHIAVELLI C/O WINSTON & STRAWN, 1700 K ST NW - WASHINGTON, DC 20006	PRES AWARD CMTTEE 1.00	0.	0.	0.
MARIO BONDIOLI OSIO C/O WINSTON & STRAWN, 1700 K ST NW - WASHINGTON, DC 20006	CHAIR DIPLOMATIC CMTTEE 1.00	0.	0.	0.
MARIO D'URSO C/O WINSTON & STRAWN, 1700 K ST NW - WASHINGTON, DC 20006	CHAIR DIPLOMATIC CMTTEE 1.00	0.	0.	0.
GIOVANNI VITALONI C/O WINSTON & STRAWN, 1700 K ST NW - WASHINGTON, DC 20006	CHAIR INSTITUTIONAL CMTTEE 1.00	0.	0.	0.

VITTORIA CAPPELLI C/O WINSTON & STRAWN, 1700 K ST NW - WASHINGTON, DC 20006	CHAIR ORGANIZING CMTTEE 1.00	0.	0.	0.
CRISTINA VALESANI C/O WINSTON & STRAWN, 1700 K ST NW - WASHINGTON, DC 20006	EXEC DIR 1.00	0.	0.	0.
ALESSANDRA DE LASSOTOVICH C/O WINSTON & STRAWN, 1700 K ST NW - WASHINGTON, DC 20006	DEPUTY SECRETARY 1.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990-EZ, PART IV		<u>0.</u>	<u>0.</u>	<u>0.</u>

FORM 990-EZ

INFORMATION REGARDING TRANSFERS  
ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

STATEMENT 6

- A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS,  
DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL  
BENEFIT CONTRACT? . . . . . [ ] YES [X] NO
  
- B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS,  
DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [ ] YES [X] NO