

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





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Form **990**

Department of the Treasury Internal Revenue Service

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)

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

OMB No. 1545-0047

2012

Open to Public Inspection

Α	For the	2012 calend	dar year, or tax y	year begir	ning		, 201	2, and en	ding					
В	Check if ap	oplicable.	C Name of organiz	zation AT	LAS ECONO	MIC RES	EARCH	FOUNDA	TION	D Emplo	yer identil	ication Nur	mber	
	Addre	ss change	Doing Business		LAS NETWO					94-	27638	145		
	Name	change	Number and stre		ox if mail is not d		et addr)	Ro	oom/suite	E Telepi	one numb	er		
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	Termi		City, town or co		m, end e	<u> </u>	Sla	te ZIP cod	e + 4	 				
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	H	cation pending			al officer		<u> </u>	2000		is a group reti			Yes	X No
	Пуфрик	auon periung				MACHTA	ICTIONI	DC 2000	1	-		<u> </u>	Yes	No
	Tay aya	mpt status	BRADLEY LIP	501(c) (4947(a)(1)		7 II 'No	all affiliates in o,' attach a lis	t. (see inst	ructions)		
<u>;</u> _			X [501(c)(3)	1 , ,) - (11	nsert no.)	4547(a)(1)	01 32		ip exemption i	>			
_	Websi		lasNetwork		T T		 7	I V (5					- DC	
K		organization:	X Corporation	Trust	Association	Other -		L Year of Fo	ormation 19	8T 1m	State of it	gal domicil	e. DC	
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9	E	OVEWENT	BY SUPPOR	TING	NOTATOON	TS WND	ORGANIZ	ATIONS	MITH I	HF FOI	FMITY	는		
Governance	<u> </u>	O CHAMP	ION THE AT	TAS AT	PION OF	A LKFF'	PRUSPE	KOOS F	IND PEAC	<u> </u>	OCTET			
퉏	2 ČI	nock this be	x F If the		on discontinue	d its opera	tions or dis	nosed of	more than 3	25% of its				
Ğ	3 N		oting members of											12
অ			dependent voting								4			11
<u>'s</u>			of individuals e	-	_						5			24
Activities &			of volunteers (e								6			0
₹	7a To	otal unrelate	ed business reve	nue from	Part VIII, colu	ımn (C), lın	e 12 .				7.			0.
	b Ne	et unrelated	l business taxab	le income	from Form 99	90-T, line 34	1 <u></u>	<u> </u>			. 7b			
										Prior Yea	r	Curi	rent Ye	ar
•	8 C	ontributions	and grants (Par	t VIII, line	:1h)	يسين وبصير والمستروب	_		🗀	9,026,	059.	8,	,440,	684.
Revenue	9 Pr	rogram serv	rice revenue (Pancome (Pant VIII, e (Part VIII, colu	rt VIII, ling	29)		- D	ļ	. [155,	429.		140,	208.
ě	10 In	vestment ir	come (Part VIII,	column (A), lines(3,_4)	and-7d)	()	1 -	[49,	633.		56,	830.
Œ			- (,	(.,,		,,,		%		31,	652.		13,	<u>,59</u> 2.
			e – add lines 8 t					line 12)		9,262,	773.	8	, 651,	, <u>314.</u>
			ımılar amounts p				<u>)</u>	<u> </u>		3,238,	239.	3,	,520,	,584.
	14 Be	enefits paid	to or for member	ers (Part I	X column-(A)), line 4)	117	1						
	15 Sa	alaries, oth	er compensation	, employe	e benefits (R	art IXI-colur	nn (A) Line	:s-5-10) .		1,727,	769.	1	,683	<u>,815.</u>
ğ	16a Pi	rofessional	fundraising fees	(Part IX,	column=(A),-1	he lle) .					Ì		40	,542.
Expenses	ЬТ	otal fundras	sing expenses (F	Part IX. co	lumn (D). line	25) ►		540,79	90				******	
ង	i		ses (Part IX, colu							3,201,	007	2		,548.
			es. Add lines 13						· 					
			es. Add illies 13 s expenses. Sub						·	8,167,				<u>,489.</u> ,825.
8	13 1	everiue iess	expenses. Sub	tract line	is non line i	<u> </u>	<u> </u>	••••		1,095,		Enc	d of Ye	
8	20 To	ntal accote	(Part X, line 16)						Begin	ning of Curr				
19			es (Part X, line 2					•	·	3,338,	220.			<u>, 368.</u>
3,5	ł							• • • • • • • • • • • • • • • • • • • •	`"├─					<u>,037.</u>
(D			fund balances.	Subtract	ine 21 from ii	ne 20		<u>· · · · </u>		3,030,	822.		, 651	<u>,331.</u>
	<u>irtill</u>	Signatui												
Com	er penalties plete. Deck	s of porjury, I d aration of prepa	eclare that I have exa arer (other than office	amined this re er) is based o	eturn, including ac n all information o	companying so of which prepar	hedules and s er has any kni	tatements, a wiedge.	nd to the best o	of my knowled	ge and bel	iet, it is truc	e, correct	, and
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7			Manass			<u> </u>		109		Phone no	- (70		<u>-159</u>	
Ma	y the IRS	aiscuss th	is return with th	e prepare	shown above	e? (see inst	ructions) .	· ·				X Ye	95	No

SCANNED SEP 27 2013

BAA For Paperwork Reduction Act Notice, see the separate instructions.

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Form 990 (2012)

TEEA0101 05/09/13

	990 (2012) ATLAS ECONOMIC RESEARCH FOUNDATION	94-27	76384	5	Р	age 2
Par						
	Check if Schedule O contains a response to any question in this Part III					
1	Briefly describe the organization's mission					
	TO STREGHTHEN THE WORLDWIDE FREEDOM					
	MOVEMENT BY SUPPORTING INDIVIDUALS AND ORGANIZATIONS WITH THE POT					
	TO CHAMPION THE ATLAS VISION OF A FREE, PROSPEROUS AND PEACEFUL S	OCTETY	·			
	Did the organization undertake any significant program services during the year which were not listed on t	he prior				
	Form 990 or 990-EZ?	ric prior		Yes	∇	No
	If 'Yes,' describe these new services on Schedule O		Ц		ы	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program servi	ces?		Yes	\mathbf{x}	No
	If 'Yes,' describe these changes on Schedule O		Ш		لثا	
4	Describe the organization's program service accomplishments for each of its three largest program service	es, as me	asured	by exp	ense:	s
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amounters, the total expenses, and revenue, if any, for each program service reported	ount of gra	ants an	d alloc	ations	s to
	others, the total expenses, and revenue, if any, for each program service reported					
	(Code) (Expenses \$6,556,076. including grants of \$ 3,026,895.) (R	'evenue	Ġ	1.4	0 20	08.)
	THINK TANK SUPPORT AND TRAINING PROGRAMS	evenue	Ÿ—	14	0,20	<u> </u>
	ATLAS STRENGTHENS NEW AND ESTABLISHED THINK TANKS IN DIFFERENT RE	GTONS				
	OF THE WORLD, THROUGH REGIONAL SUPPORT PROGRAMS, ADVISORY SERVICE					
	TRAINING WORKSHOPS, AND NETWORKING/SKILL-BUILDING EVENTS.	<u> </u>				
						_ _
					. .	
4 b	(Code:) (Expenses \$ 328,792. including grants of \$ 309,892.) (R		\$			0.)
	AWARDS PROGRAMS - ATLAS ADMINISTERED AWARDS PROGRAMS THAT RECOGNI	ZED				
	OUTSTANDING EDUCATIONAL WORK BY THINK TANKS, IN ORDER TO BRING		- - -			
	MORE ATTENTION TO THE PUBLIC BENEFITS OF THESE INSTITUTES AND TO					
	CREATE GOOD INCENTIVES FOR THE BROADER SECTOR.			 -		
			- - -			
4 c	(Code) (Expenses \$ 332,046. including grants of \$ 183,797.) (R	evenue	\$			0.)
	ACADEMIC PROGRAMS - ATLAS'S ACADEMIC PROGRAMS PROVIDED GRANTS AND					
	FELLOWSHIPS TO INSTITUTIONS AND SCHOLARS WHO ARE WORKING TO					- .
	IMPROVE THE UNDERSTANDING OF THE WORKINGS OF A FREE AND					
	PROSPEROUS SOCIETY.					
						
		-		-	· -	- -
	Other program services (Describe in Schedule O.)				_	
	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$,	
	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ► 7,216,914.		_		<u>) </u>	
	/, Z10, J14.					

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable	,		
ā	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ŧ	b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VII	11 b		Х
•	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
•	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	X	
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		X
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	├	X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
i	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15	Х	
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20	 	Х
- 1	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		Х
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	: Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	X	ļ
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ŧ	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	X	
BAA		Form	990	(2012

	Check if Schedule O contains a response to any question in this Part V		=-			
_			,		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1 a	71			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1 b	0			
•	Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?	and rep	portable gaming		ū	
	-	1		1 c	Х	
2 8	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2 a	24			
Ŀ	of at least one is reported on line 2a, did the organization file all required federal employment			2 b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see inst					
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year		<i>5</i> ,	3 a		l x
	of 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O			3 Ь		
	At any time during the calendar year, did the organization have an interest in, or a signature of	or other	authority over a			
	financial account in a foreign country (such as a bank account, securities account, or other fin	ancial a	account)?	4 a		Х
Ł	olf 'Yes,' enter the name of the foreign country					
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Fir	nancial	Accounts			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	year?		5 a		Х
ŀ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter	r transa	ction?	5 b		Х
(: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?			5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and	d did th	e organization			
	Does the organization have annual gross receipts that are normally greater than \$100,000, and solicit any contributions that were not tax deductible as charitable contributions?			6 a		X
t	olf 'Yes,' did the organization include with every solicitation an express statement that such cor	ntributio	ns or gifts were			
-	not tax deductible?			6 b		
,	Organizations that may receive deductible contributions under section 170(c).				-	
ā	Did the organization receive a payment in excess of \$75 made partly as a contribution and paservices provided to the payor?	rtly for	goods and		· ·	
	· · · · · · · · · · · · · · · · · · ·			7 a	X	
	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for whi	سنداه مام		7 b		
•	Form 8282?	CH IL Wa	as required to file	7 c	•	X
c	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b	enefit c	ontract?	7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal bene			7 f		Х
ç	lf the organization received a contribution of qualified intellectual property, did the organization	n file Fo	orm 8899			
	as required?			7 g		
ŀ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the or Form 1098-C?	organiza	ation file a	7 h		
_				711		-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, has	g organ	izations. Did the			
	holdings at any time during the year?	ve exce	:33 DU3IIIE33	8		
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?			9 a		
Ł	Did the organization make a distribution to a donor, donor advisor, or related person?			9 b		
	Section 501(c)(7) organizations. Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10 a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 Ь				
	Section 501(c)(12) organizations. Enter					
	Gross income from members or shareholders	11 a				
t	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 b				
12 a	Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of		10412	12 a		1
	of Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b	10417	124		ļ
	Section 501(c)(29) qualified nonprofit health insurance issuers.	120				
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
•	Note. See the instructions for additional information the organization must report on Schedule	0	,	13a		
F	Enter the amount of reserves the organization is required to maintain by the states in	•				
	which the organization is licensed to issue qualified health plans	13 Ь				1
	Enter the amount of reserves on hand	13 c				
	Did the organization receive any payments for indoor tanning services during the tax year?		-	14a		Х
b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Sc	hedule	0	14b		

Form 990 (2012) ATLAS ECONOMIC RESEARCH FOUNDATION 94-2763845 Page 6 Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below. and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 12 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1 b 11 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 Х Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors or trustees, or key employees to a management company or other person? Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 X Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 Χ 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a members of the governing body? Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? Χ 7 h Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 a X 8 b Х b Each committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? Χ 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b operations are consistent with the organization's exempt purposes? Х 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a Χ b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12 c Χ 13 Х 13 Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 14 Χ Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Χ **b** Other officers of key employees of the organization 15b Х If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply ХI Other (explain in Schedule O) Another's website Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization 1201 L ST, NW, 2ND FLOOR WASHINGTON DC 20005 (202) 449-8449

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Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization				((•			
(A) Name and Title	(B) Average hours per week (list	Position (do not check more than one box, unless person is both an officer and a director/trustee)					n an e) 	(D) Reportable compensation from	Reportable compensation from	(F) Estimated amount of other compensation
	any hours for related organiza tions below dotted line)	individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) DAN GROSSMAN	8.00									
CHAIRMAN OF THE BOARD		Χ		Χ				0.	0.	0.
(2) CHARLES ALBERS	6.00									
TREASURER		Χ		Х				0.	0.	0.
	4.00	Х						0.	0.	0.
(4) ANDREA RICH	4.00									
DIRECTOR		Х						o.l	0.	0.
(5) RENE SCULL	4.00			-						
DIRECTOR	_	Х						o.	0.1	0.
(6) WILLIAM SUMNER DIRECTOR	4.00	Х						0.	0.	0.
	4.00							<u></u>		
DIRECTOR	- 3	Х						o.l	0.	0.
(8) HON.CURTIN WINSOR	4.00							· ·	· · ·	
DIRECTOR	- 	х						o. l	0.	0.
(9) TIMOTHY BROWN	4.00							· ·		
DIRECTOR	-	Х						0.	0.	0.
(10) JOHN BLUNDELL	4.00	- 11						0.		•
DIRECTOR	_ : • • • •	Х						0.	0.	0.
(11) GERRY OHRSTROM	4.00						<u> </u>	0.		
DIRECTOR	- - - 	Х						0.	0.	0.
(12) ALEJANDRO CHAFUEN	40.00									<u>.</u>
PRESIDENT, DIRECTOR	-	Х		Х	x		ŀ	159,767.	0.	5,278.
(13) BRADLEY LIPS	40.00						 		<u> </u>	5,2.0.
CEO/SECRETARY				х	Х	Х		203,951.	0.	5,609.
(14) TOM PALMER	40.00							200,001.		3,003.
VP/INTL PROGRAMS	-			х	х			175,000.	0.	1,013.

Part VII Section A. Officers, Directors, True	stees, l	Key	Em			es, a	anc	Highest Com	pensated Emplo	oyees	(cor	1t)
(A) Name and title	Average hours per week	box, office	unles cer an	neck is per id a c	ition more rson direct	than o	an lee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	amou	(F) stimated int of oth pensatio	
	(list any hours for related organiza - tions below dotted line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	ormer	(W-2/1099-MISC)	(W-2/1099-MISC)	orga and	om the anization d related anization	i
(15) MATT WARNER VP/PROGRAMS & COMMUNICATIONS	40.00	2		Х	Х			124,451.	0.		5 , (013.
(16)	- -											
(18)		<u> </u> 										
(19)												
(20)(21)												
(22)												
(23)												
(24)												
(25)												
1 b Sub-total c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	ı A						>	663,169.	0.		16,9	
2 Total number of individuals (including but not limit from the organization ► 4	ed to tho	se lis	sted	abo	ve)	who	rece	·	1	e comp		
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such			кеу е	mp	loye	e, or	hıg	hest compensated	i employee	3	Yes	No X
For any individual listed on line 1a, is the sum of r the organization and related organizations greater such individual	eportable	e con	npen 0? <i>If</i>	satı ' <i>'Ye</i>	on a	and o	the lete	r compensation fro Schedule J for	om	4	X	
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'									ndıvıdual	5		X
Section B. Independent Contractors 1 Complete this table for your five highest compensations.	ited inde	pend	ent d	cont	ract	ors t	hat	received more that	n \$100,000 of			
compensation from the organization Report comp (A) Name and business addre		tor ti	ne ca	alen	idar	year	enc	Description)		C)	 on
NONE					-		_					
							-					
Total number of independent contractors (including	_	lımıt	ed to	the	ose	listed	ab	ove) who received	d more than			
\$100,000 in compensation from the organization	0								·			

	Check if Schedule O contains a response to any questions.	stion in this Part VIII			
<u> </u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ANSIN	1 a Federated campaigns 1 a				
요함	b Membership dues 1 b				
IR A	c Fundraising events 1 c				
S, Z	d Related organizations 1 d				
S S	e Government grants (contributions)				
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 8,440,684				
중	g Noncash contributions included in lins la-lif \$ 31, 68	— <u> </u>			
굘	h Total. Add lines 1a-1f Business Code	8,440,684.			
PROGRAM SERVICE REVENUE	2a PROGRAM FEES 900099	140,208.	140,208.	0.	0.
뿔	b	140,208.	140,208.	0.	0.
€	с				
S	d				
₩.	e				
8	f All other program service revenue			-	
품	g Total. Add lines 2a-2f	1 40,208.		_	
	3 Investment income (including dividends, interest and	· -		-	
	other similar amounts)	► 53,606.	0.	0.	53,606.
	4 Income from investment of tax-exempt bond proceeds	•			
	5 Royalties (i) Real (ii) Personal	•			
- 1	6 a Gross rents				
	b Less rental expenses	_			
	c Rental income or (loss)				
	d Net rental income or (loss)	<u> </u>			
	(i) Securities (ii) Other		 		
	7 a Gross amount from sales of assets other than inventory 3, 224.	_			
	b Less: cost or other basis				
	and sales expenses				
	c Gain or (loss) 3,224.				
	d Net gain or (loss)	3,224.	3,224.	0.	0.
ENCE	8 a Gross income from fundraising events (not including \$				
OTHER REVEN	of contributions reported on line 1c)				
嗇	See Part IV, line 18	_			
5	b Less direct expenses c Net income or (loss) from fundraising events	_			•
	9a Gross income from gaming activities See Part IV, line 19		-		
	b Less direct expenses b				
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances				
	b Less cost of goods sold b	_			
j	c Net income or (loss) from sales of inventory	•			1
	Miscellaneous Revenue Business Code				<u> </u>
	11a MISCELLANEOUS 900099	13,592.	13,592.	0.	0.
	b				
	c				
	d All other revenue				
	e Total. Add lines 11a-11d	13,592.			
	12 Total revenue. See instructions	► 8,651,314.	157,024.	0.	53,606.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (B) (D) (A) Total expenses (C) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII Management and Fundraising Program service expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 488,198 488,198 Grants and other assistance to individuals in the United States See Part IV, line 22 131,263 131,263 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 2,901,123 901,123 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 663, 169 379,346 117,952 165,871 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 789,730 538,095. 121,546. 130,089. Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions) 9,660 8,150. 248 1,262. Other employee benefits 8,121. 122,447 108,382. 5,944. Payroll taxes 98,809 64,221. 15,003 19,585. Fees for services (non-employees) a Management **b** Legal 28,165 8,379 8,841 10,945. c Accounting 0. 27,826 27,826 0. **d** Lobbying e Professional fundraising services See Part IV, line 17 40,542 40,542. f Investment management fees g Other (If line 11g amt exceeds 10% of line 25, col-695,546 654,814 19,720 21,012 umn (A) amt, list line 11g expenses on Sch O) Advertising and promotion 13 Office expenses 40,863 37,299 1,395 2,169. 14 Information technology 15 Royalties 16 Occupancy 359,857 316,956 17,339 25,562. 17 Travel Payments of travel or entertainment 18 expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 1,152,219 1,114,748 4,421 33,050. 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 27,440 24,288 1,332 1,820. 23 Insurance 0. 12,088 0. 12,088 Other expenses Itemize expenses not 24 covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a PRINTING & REPRODUCTION _ 277,170 247,400 2,116 27,654. b DUES & SUBSCRIPTIONS _ 97,629 85,672 2,538 9,419. C POSTAGE & SHIPPING 66,258 31,231 972 34,055. d COMMUNICATIONS 37<u>,9</u>57 3,258 43,465 2,250. e All other expenses 80,022 39,392 33,246 7,384. Total functional expenses. Add lines 1 through 24e 153,489 216,914 395,785 540,790. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► If following SOP 98-2 (ASC 958-720)

Balance Sheet

Check if Schedule O contains a response to any question in this Part X (B) End of year (A) Beginning of year Cash - non-interest-bearing 1 497,936 1,306,547. 2 2 Savings and temporary cash investments 235,792 41,620. 3 Pledges and grants receivable, net 3 887,165 1,205,273. 4 Accounts receivable, net 26,185 24,354. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 47.718 9 7,691 10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 254,411 b Less accumulated depreciation 10 b 191,156 10 c 63,255 75,268 Investments - publicly traded securities 11 1,527,747 1,242,498. Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 Intangible assets 14 Other assets See Part IV, line 11 15 40,231 15 49,130. Total assets. Add lines 1 through 15 (must equal line 34) 3,338,042 16 3,940,368. Accounts payable and accrued expenses 17 17 206,704. 228,250 18 Grants payable 60,000 18 82.333 Deferred revenue 19 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 18,970 25 Total liabilities. Add lines 17 through 25 307,220 26 289,037 Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔣 and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 122,908 27 107,138. Temporarily restricted net assets 28 28 907,914 544,193 Permanently restricted net assets 29 Q R Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. UND Capital stock or trust principal, or current funds 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 33 030, 822 3,651, 331 Total liabilities and net assets/fund balances 24 34 338,042 3,940,368

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Part X

Form 990 (2012)

		<u>2763845 </u>		Pa	ige 12
Pa	rt XI Reconciliation of Net Assets				
	 Check if Schedule O contains a response to any question in this Part XI 				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,6	51,3	314.
2	Total expenses (must equal Part IX, column (A), line 25)	2			189.
3	Revenue less expenses Subtract line 2 from line 1	3	4	97,8	325.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,0	30,8	322.
5	Net unrealized gains (losses) on investments	5	1:	22,6	584.
6	Donated services and use of facilities	6			
7		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))				
Da	rt XII Financial Statements and Reporting	10	3,6	51,	<u> 331.</u>
Га					
	Check if Schedule O contains a response to any question in this Part XII				Щ
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				,
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 :	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
ı	b Were the organization's financial statements audited by an independent accountant?		2 b	Χ	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate				
	basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis				,
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,	2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3 :	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Audit Act and OMB Circular A-133?	ngle	3 a		Х
ļ	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ed audit	3 b		
BAA			Form	990	(2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047 2012

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Schedule A (Form 990 or 990-EZ) 2012

Name of	the	organization							Employer	identificat	ion number		
ATLA	S	ECONOMIC RESE	ARCH FOUNDATI	ON					94-27	63845	•		
Part		Reason for Publ	ic Charity Status	(All organizations	must d	comple	te this	part.)	See II	nstruct	ions.		
The or	gar	nization is not a privat	e foundation because	it is (For lines 1 through	gh 11, cl	heck on	ly one bo	ox.)					
1				iation of churches descr		section	170(b)(1	χΑχί).					
2		A school described in	section 170(b)(1)(A)((ii). (Attach Schedule E)								
3		A hospital or a coope	rative hospital service	e organization described	in sect i	ion 170	(b)(1)(A)	(iii).					
4		A medical research o	rganization operated	in conjunction with a ho	spital de	escribed	ın secti	on 170(b)(1)(A)(iii) Ente	r the hospi	tal's	
·		name, city, and state											
5		170(b)(1)(A)(iv). (Cor	mplete Part II)	a college or university					mental u	ınıt desci	ribed in sec	tion	
6	Ц			vernmental unit describ									
7	\mathbb{X}	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)											
8		A community trust de	scribed in section 170	0(b)(1)(A)(vi). (Complete	e Part II)							
9		related to its exempt for	An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities elated to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and inrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). Complete Part III)										
10			•	clusively to test for pub		•			•				
11		An organization organi supported organizatio supporting organizati	ns described in sectior	usively for the benefit of, to in 509(a)(1) or section 50 is 11e through 11h	o perforn 19(a)(2)	n the fun See sec	ctions of tion 509	, or carry (a)(3). C	out the p Check the	ourposes box tha	of one or mo t describes	ore put the typ	olicly be of
		a Type I b	Type II c	Type III – Function	ally inte	grated	c	ı 🗌 :	Type III -	– Non-fu	ınctıonally ı	ntegra	ited
е		By checking this box, other than foundation section 509(a)(2).	I certify that the orga managers and other	inization is not controlle than one or more public	ed directl cly supp	ly or ind orted or	irectly by ganization	y one o	r more d cribed in	isqualifie section	ed persons 509(a)(1) o	or	
f		If the organization re- check this box	ceived a written deteri	mination from the IRS t	hat is a	Type I,	Type II c	or Type	III suppo	orting org	ganızatıon,		
g		Since August 17, 200	6, has the organization	on accepted any gift or	contribu	ıtıon froi	m any of	the fol	lowing p	ersons?			
		(i) A person who d	lirectly or indirectly co	entrols, either alone or to	ogether '	with per	sons de	scribed	ın (ıı) ar	nd (III)		Yes	No
		below, the gove	erning body of the sup	ported organization?	J	•			. ,	` ,	11 g (i)		
		(ii) A family member	er of a person describ	ed in (i) above?							11 g (iı)		_
				lescribed in (i) or (ii) ab							11 g (iii)		
h		Provide the following	information about the	supported organization	n(s)					<u>.</u>	<u>'</u>		
		(i) Name of supported organization	(u) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is organiza column (i) your go docur	ation in) listed in verning	(v) Did yo the organi column (i) supp	zation in of your	(vi) le organiza colun organiza U S	ation in in (i) d in the	(vii) Amount sup		etary
					Yes	No	Yes	No	Yes	No			
(A)						-							
(B)												_	
(C)											_		
(D)													
(E)												-	
Total													
BAA F	or	Paperwork Reductio	n Act Notice, see the	Instructions for Form 9	90 or 99	0-EZ.	·	*	Schedule	e A (For	m 990 or 99	90-EZ	2012

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support						
begir	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	6,497,129.	5,178,025.	5,711,941.	9,026,059.	8,440,684.	34,853,838.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0.	0.	0.	0.	0.	0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0.	0.	0.	0.	0.	0.
4	Total. Add lines 1 through 3	6,497,129.	5,178,025.	5,711,941.	9,026,059.	8,440,684.	34,853,838.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						8,968,144.
6	Public support. Subtract line 5 from line 4						25,885,694.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	6,497,129.	5,178,025.	5,711,941.	9,026,059.	8,440,684.	34,853,838.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	92,680.	24,190.	48,325.	70,403.	53,606.	289,204.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0.	0.	0.	0.	0.	0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						35,143,042.
12	Gross receipts from related activi	ities, etc (see inst	ructions)			12	
13	First five years. If the Form 990 organization, check this box and	is for the organiza stop here	ition's first, secon	d, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ []
Sec	tion C. Computation of Pu	blic Support P	ercentage				
14	Public support percentage for 20	12 (line 6, column	(f) divided by line	e 11, column (f))		14	73.66%
15	Public support percentage from 2	2011 Schedule A,	Part II, line 14			15	78.47%
16 a	33-1/3% support test $-$ 2012. If and stop here. The organization	the organization d qualifies as a pub	lid not check the b licly supported org	oox on line 13, and ganization	d the line 14 is 33	-1/3% or more, ch	leck this box ►
b	33-1/3% support test $-$ 2011. If t and stop here. The organization	he organization di qualifies as a pub	d not check a box licly supported or	on line 13 or 16a ganization	a, and line 15 is 33	3-1/3% or more, cl	heck this box ►
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	nd-circumstances'	test, check this b	oox and stop here.	. Explain in Part I\	10% / how ►
	10%-facts-and-circumstances te or more, and if the organization rorganization meets the 'facts-and	meets the 'facts-ai 1-circumstances' t	nd-circumstances' est The organizat	test, check this b ion qualifies as a	oox and stop here. publicly supported	. Explain in Part I\ d organization	/ how the ►
18	Private foundation. If the organiz	ation did not ched	ck a box on line 13	3, 16a, 16b, 17a,	or 17b, check this	box and see instr	uctions -

94-2763845

Schedule A (Form 990 or 990-EZ) 2012 ATLAS ECONOMIC RESEARCH FOUNDATION

Part III Support Schedule for Organizations Described in Section 509(a)(2)

11	_ Support Schedule for Organizations Described in Section 509(a)(2)
•	(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails
	to qualify under the tests listed below, please complete Part II)
n	A. Public Support

<u>Sec</u>	tion A. Public Support						
Calen	dar year (or fiscal yr beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's						.
3	tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513						
4 5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the						
	organization without charge						
7 a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	: Add lines 7a and 7b		·				
8	Public support (Subtract line 7c from line 6)	_					
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6			•			_
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add Ins 9 10c 11, and 12)	-			<u> </u>		
14	First five years. If the Form 990 i organization, check this box and	s for the organiza stop here	tion's first, second	, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ □
	tion C. Computation of Pul						
15	Public support percentage for 20	12 (line 8, column	(f) divided by line	e 13, column (f))		15	96
16	Public support percentage from 2	011 Schedule A,	Part III, line 15			16	ક
	tion D. Computation of Inv			•		, ,	
17	Investment income percentage for				nn (f))	17	9
18	Investment income percentage fr			-		18	8
19 a	33-1/3% support tests $-$ 2012. If is not more than 33-1/3%, check	the organization of	did not check the I	oox on line 14, ar	nd line 15 is more a publicly suppor	than 33-1/3%, and ted organization	
ь	33-1/3% support tests – 2011. If line 18 is not more than 33-1/3%	the organization of	did not check a bo	x on line 14 or lin	ne 19a, and line 16	is more than 33.1	/3%, and ►
20	Private foundation. If the organiz						▶ =
							

Scriedule A	(Form 990 or 990	-EZ) 2012 ATL	AS ECONOMI	C RESEARCH	I FOUNDATION	94-2/63	,845	Page 4
Part IV	Sùpplemental Part II, line 17 (See instruction	Information. a or 17b; and ons).	Complete this Part III, line	s part to prov 12. Also com	vide the explant plete this part	ations required by F for any additional in	art II, line 10 of the second	0;
		 -						·
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
 Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
 Attach to Form 990.
 See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Employer identification number

ATLAS ECONOMIC RESEARCH FOUNDATION Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? No Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? No Yes Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2 a 2 b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2 d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year **S** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 ▶\$ (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X ▶ \$

Schedule D (Form 990) 2012 ATLAS	<u>ECONOMIC</u>	RESEARCH FOUN	NDATION	94-276	3845		Page 2
Part III Organizations Mainta	ining Collect	ions of Art, Histo	orical Treasures, c	or Other Similar Ass	ets (co	ontınu	ed)
3 Using the organization's acquisition items (check all that apply)	on, accession, a	nd other records, che	ck any of the following	that are a significant us	e of its c	ollectio	'n
a Public exhibition		d Loan	or exchange programs				
b Scholarly research		e Other					
c Preservation for future genera	ations	_					
4 Provide a description of the organ Part XIII					: in		
5 During the year, did the organizal to be sold to raise funds rather the	an to be mainta	ined as part of the or	ganization's collection?	•	Yes		No
Part IV Escrowand Custodial / reported an amount of	Arrangement n Form 990,	s. Complete if the c Part X, line 21.	organization answe	red 'Yes' to Form 990	, Part I\	√, line	9, or
1 a Is the organization an agent, trus on Form 990, Part X?				er assets not included	Yes		No
b If 'Yes,' explain the arrangement	in Part XIII and	complete the followin	g table	[
a Danisa sa kad					Amount	<u> </u>	
c Beginning balance				1 c			
d Additions during the year				1 d			
e Distributions during the year				1 e			
f Ending balance		000 5 11/1 010		11			1
2 a Did the organization include an a				-	Yes		_ No
b If 'Yes,' explain the arrangement	in Part XIII Che	eck here if the explant	ion has been provided	in Part XIII		L	اـ
Part V Endowment Funds. C	omplete if th	e organization ar	swered 'Yes' to F	orm 990, Part IV, Iır	ne 10.		
	(a) Current	(b) Prior yea	ar (c) Two years	(d) Three years	(e) F	our year	rs
1 a Beginning of year balance							
b Contributions							
c Net investment earnings, gains, and losses		-					
d Grants or scholarships					1		
e Other expenditures for facilities and programs							
f Administrative expenses							
g End of year balance				"-"-	1		
2 Provide the estimated percentage	of the current y	ear end balance (line	1g, column (a)) held	as			
a Board designated or quasi-endow	ment ►	8					
b Permanent endowment ►							
c Temporarily restricted endowmen	t ►	ક					
The percentages in lines 2a, 2b,	and 2c should e	qual 100%					
3 a Are there endowment funds not in	n the nossession	of the organization t	hat are held and admir	nistered for the			
organization by	The possession	r or the organization t	nat are new and admin	ilistered for the		Yes	No
(i) unrelated organizations					3a(i)		
(ii) related organizations					3a(ii)		
b If 'Yes' to 3a(II), are the related o	rganizations list	ed as required on Sch	nedule R?		3b		
4 Describe in Part XIII the intended	uses of the org	anızatıon's endowmer	nt funds				
Part VI Land, Buildings, and	Equipment.	See Form 990, Pa	art X, line 10.				
Description of property	(a	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) E	Book va	ilue
1 a Land							
b Buildings							
c Leasehold improvements							
d Equipment			254,411.	191,156.		63	,255.
e Other							
Total. Add lines 1a through 1e (Columi	n (d) must equa	Form 990, Part X, co	olumn (B), line 10(c))			63	,255.

BAA

Schedule **D** (Form 990) 2012

Part VII	Investments - Other Securities. See	Form 990, Part X,	line 12.	
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Co end-of-year market val	
(1) Financi	ial derivatives			
	-held equity interests			
(3) Other				
(A)				
(B)	- 			
(C)				
(D)	- 	-		
(E)				
(F)	- 			
$\frac{(G)}{a}$				
(H)				
(l)	-			
	nn (b) must equal Form 990, Part X, column (B) line 12)			
Part VIII	Investments - Program Related. See			
	(a) Description of investment type	(b) Book value	(c) Method of valuation Co end-of-year market val	ost or lue
(1)			Cha or year market va	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)			· · · · · · · · · · · · · · · · · · ·	
Total (Colun	nn (b) must equal Form 990, Part X, column (B) line 13)			
Part IX	Other Assets. See Form 990, Part X,	ine 15.		
		scription		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
_(10)				
	lumn (b) must equal Form 990, Part X, column (B		•	
Part X	Other Liabilities. See Form 990, Part		· · · · · · · · · · · · · · · · · · ·	
	(a) Description of liability	(b) Book value		
	ral income taxes			
	URITY DEPOSIT		0.	
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
1 otal. (Colum	nn (b) must equal Form 990, Part X, column (B) line 25)	<u> </u>	0.	
∠. FIN 48 (A	SC 740) Footnote In Part XIII, provide the text of the footnote to	i the organization's financial st	tatements that reports the organization's liability for u	incertain tax positions

under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2012	ATLAS ECONOMIC RESEARCH FOUNDAT	<u>'ION 94</u>	<u>-276384</u>	5 Page 4
Part XI Reconciliation	of Revenue per Audited Financial State	ments With Revenue per Re	turn	
 Tetal revenue, gains, and 	other support per audited financial statements		1	8,773,998.
2 Amounts included on line	1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains on in	ivestments	2a 122,684.		
b Donated services and use		2 b		
c Recoveries of prior year g		2 c		
d Other (Describe in Part X	ill)	2 d	.	
e Add lines 2a through 2d			2 e	122,684.
3 Subtract line 2e from line			3	8,651,314.
4 Amounts included on Form	m 990, Part VIII, line 12, but not on line 1			
·	included on Form 990, Part VIII, line 7b	4 a	.	
b Other (Describe in Part X	III)	4b	.	
c Add lines 4a and 4b			4 c	
	and 4c. (This must equal Form 990, Part I, line	15	5	8,651,314.
	of Expenses per Audited Financial Stat	ements With Expenses per	Return	<u>.</u> .
•	s per audited financial statements		1	8,153,489.
	1 but not on Form 990, Part IX, line 25	1 - 1		
a Donated services and use	of facilities	2 a	. '	
b Prior year adjustments		2 b	. .	
c Other losses		2 c	. .]	
d Other (Describe in Part X	ill)	2 d	. _	
e Add lines 2a through 2d	1		2 e	0 150 100
3 Subtract line 2e from line 4 Amounts included on Form		1 1	3	8,153,489.
	ກ 990, Part IX, line 25, but not on line 1: included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part X	· · · · · · · · · · · · · · · · · · ·	4 b	-	
c Add lines 4a and 4b	··· /	40	4 c	
	3 and 4c. (This must equal Form 990, Part I, line	18)	5	8,153,489.
Part XIII Supplemental		•	<u> </u>	0,100,100.
Complete this part to provide the line 4, Part X, line 2, Part XI, li	ne descriptions required for Part II, lines 3, 5, and nes 2d and 4b, and Part XII, lines 2d and 4b. Also	9, Part III, lines 1a and 4, Part IV, I complete this part to provide any a	ines 1b and additional in	2b, Part V, formation
Pt X Line 2F	IN 48 (ASC 740) FOOTNOTE TEXT:	_"THE_ORGANIZATION'S_!	FORMS	
	00 5			
- - -	90, RETURN OF ORGANIZATION EXEM	PT FROM INCOME TAX, FO	OR THE _	
<u>-</u> - <u>-</u>	EARS ENDING 2010, 2011, AND 201	2 ARE SUBJECT TO EXAM	[NATION	
В	Y THE IRS, GENERALLY FOR THREE	YEARS AFTER THEY WERE	FILED.'	1
				.
			-	
ВАА		· · · · · ·	Schedule D	(Form 990) 2012

Schedule D	(Form 990) 2012	ATLAS	ECONOMIC RESEARCH tion (continued)	FOUNDATION	 94-2763845	Page 5
Part XIII	Supplementa	l Informa	tion (continued)	<u></u>		
•						
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Schedule F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16.
 ► Attach to Form 990.
 ► See separate instructions.

Open to Public Inspection

Name of the organization
ATLAS ECONOMIC RESEARCH FOUNDATION

Employer identification number

94-2763845

Part I General Information on Activities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes

etance outside the

For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) Sub-Saharan Africa	0	0	GRANTS TO RECIPIENTS	ECONOMIC EDUCATION	45,093.
(2) East Asia and Pacific	0	0	GRANTS TO RECIPIENTS	ECONOMIC EDUCATION	133,800.
(3) North America	0	0	GRANTS TO RECIPIENTS	ECONOMIC EDUCATION	316,509.
(4) Europe	0	0	GRANTS TO RECIPIENTS	ECONOMIC EDUCATION	940,037.
(5) South America	0	0	GRANTS TO RECIPIENTS	ECONOMIC EDUCATION	454,384.
(6) Middle East	0	0	GRANTS TO RECIPIENTS	ECONOMIC EDUCATION	29,910.
Central America	0	0	GRANTS TO RECIPIENTS	ECONOMIC EDUCATION	9,210.
(8) South Asia	0	0	GRANTS TO RECIPIENTS	ECONOMIC EDUCATION	469,150.
(9) Russia	0	0	GRANTS TO RECIPIENTS	ECONOMIC EDUCATION	57,050.
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3 a Sub-total	0	0			2,455,143.
b Total from continuation sheets to Part I					
C Totals (add lines 3a and 3b)	0	0			2,455,143.

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2012

Schedule F (Form 990) 2012 ATLAS ECONOMIC RESEARCH FOUNDATION

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
£			Sub-Saharan Africa ECONOMIC EDUCATI	ECONOMICEDUCATI	45,093.	CHECK			
(2)			East Asia and Pacifi ECONOMICEDUCATI	ECONOMIC EDUCATI	133,800. CHECK	CHECK			
9			Europe	ECONOMIC EDUCATI	940,037. CHECK	CHECK			
(4)			South America Economic EDUCATI	ECONOMIC EDUCATI	454,384.	CHECK			:
9			Middle East	ECONOMIC EDUCATI	29,910.	CHECK			
9			Central America Economic Educati	ECONOMIC EDUCATI	9,210.	СНЕСК			
9			South Asia	ECONOMIC EDUCTIO	469, 150.	СНЕСК			
8			North America Economic EDUCATI	ECONOMICEDUCATI	316,509.	CHECK			
6)			Russia	ECONOMICEDUCATI	57,050.	CHECK			
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									:
(16)									
2 Ent	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which	ations listed above the	at are recognized as	charities by the	foreign country, re	cognized as tax-ex	xempt by the IRS, o	r for which	,

the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

BAA

Schedule F (Form 990) 2012

Page 3

Schedule F (Form 990) 2012 ATLAS ECONOMIC RESEARCH FOUNDATION

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) ECONOMIC EDUCATION	Sub-Saharan Afrıca 6	9					
(2) ECONOMIC EDUCATION	East Asia and Pacific 6	9					
(3) ECONOMIC EDUCATION	Europe	33					
(4) ECONOMIC EDUCATION	South America	37					
(5) ECONOMIC EDUCATION	Middle East	5					
(6) ECONOMIC EDUCATION	North America	10			-		
(7) ECONOMIC EDUCATION	Russia	3					
(8)							
(6)			!				
(10)							
(11)							
(12)							
(13)							
(14)	:						
(15)							
(16)							
(1)							
(18)							
ВАА						Schedule F	Schedule F (Form 990) 2012

BAA	TEEA3505 12/17/12	Schedule F (F	orm 990) 2012
	Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	⊠ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	⊠ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	⊠ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	⊠ No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
	t IV Foreign Forms	-2103043	1 ago 4
SCHE	Eddle F (Form 990) 2012 ATLAS ECONOMIC RESEARCH FOUNDATION 94	-2/63845	Page 4

Schedule F (Form 990) 2012	ATLAS ECONOMIC	RESEARCH	FOUNDATION	94-2763845	Page 5
column (f) (ad (accounting n	s part to provide the ecounting method; a nethod); Part III (acc	mounts of invocation	vestments vs expend nod): and Part III. col	e 2 (monitoring of funds); Par itures per region); Part II, line umn (c) (estimated number o dditional information (see inst	e 1 of
Pt I Line 2	ATLAS RELIES O	N_THE_GRANT	rs committee of	ITS BOARD OF	
-	DIRECTORS TO P	ROVIDE OVE	RSIGHT OF THE WOR	RK OF ATLAS STAFF	
-	IN ESTABLISHING	G THE ELIG	BILITY AND APPRO	OPRIATENESS OF CANDIDAT	<u>ES</u>
- 	FOR GRANTS WITH	HIN ATLAS I	PROGRAMS. ATLAS	SUPPORTS (A) ORGANIZAT	IONS
- 	THAT OPERATE AS	S NON-PROF	IT_RESEARCH_INST	ITUTES, (B) "INTELLECTU	<u>AL</u>
-	ENTREPRENEURS"	EMBARKING	ON THE CREATION	OF_SUCH_ORGANIZATIONS,	_AND
	(C) SCHOLARS W	ORKING IN I	FIELDS OF INTELL	ECTUAL INQUIRY RELEVANT	
	TO ATLAS PROGRA	AMS. GRAN	rees receiving \$	5,000 OR MORE FROM ATLA	<u>'S</u>
	MUST PROVIDE R	EPORTS REGA	ARDING THE USE O	F FUNDS, EXCEPT	
	FOR THOSE INSTA	ANCES IN W	HICH ATLAS'S GRAN	NTS REPRESENTS PRIZES	
- -	TO RECOGNIZE O	<u>UTSTANDING</u>	WORK (ALREADY CO	OMPLETED OR ONGOING)	
	IN THE FIELDS	OF ENDEAVO	R CENTRAL TO THE	ATLAS MISSION.	
	·	-			
- -					
- -	· -				
- -					
- 		- 			
		-			
-	- 			-	
	 -				
					
					
	~				

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service	or 19, or	r if the organiza Attach to Form	tion enter 990 or Fo	red more tl rm 990-EZ	han \$15,000 on Form 99 . ► See separate inst	00-EZ, line 6a. ructions.	Inspection
Name of the organization	_					Employer identi	fication number
ATLAS ECONOMIC						94-27638	45
Part Fundraising	Activities. Comp Z filers are not red	lete if the organ	ization an	swered 'Ye	es' to Form 990, Part IV	, line 17	
					wing activities Check a	II that apply	
a Mail solicitat		disca lanas tino	agii aiiy (X Solicitation of non-	* * =	
	email solicitations				Solicitation of gove	,	
c X Phone solicit				,	X Special fundraising	-	
d X In-person so				g	A Special fundraising	events	
2a Did the organizat	tion have a written	or oral agreem	ent with a	iny individu	ual (including officers, d ofessional fundraising s	rectors, trustees or k	xey X Yes No
b If 'Yes,' list the to		dividuals or entit			rsuant to agreements u		
(i) Name and addres or entity (fur		(ii) Activity	have custoo	fundraiser dy or control ibutions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
			Yes	No		00.0 (7	
1				,,			
	LD & ASSOC, LLC	GENERAL FUNDRAL		X	0.	40,542	2. 0.
2							
3							
4							
5					,		
6							
7							
8							
9							
10							
Tabel		1					
3 List all states in	which the organize	ation is registere	ad or licen	end to solu	0. cit contributions or has	40,542	
or licensing	William the organize	ation is registere	d or licer	1360 10 3011	cit contributions or has	been notified it is ext	supt nom registration
Line N	umber						
PART I,	LINE 3 STAT	res in whi	CH THE	ORGANI	ZATION IS REGI	STERED TO SOL	ICIT
	CONT	RIBUTIONS:	ALABA	MA, ALA	SKA, ARIZONA, ARI	KANSAS, CALIFOR	NIA,
	COLO	DRADO, CONN	ECTICU	T, DIST	RICT OF COLUMBIA	, FLORIDA, GEOR	GIA,
	ILLI	INOIS, KANS	AS, KEN	TUCKY,	LOUISIANA, MASSA	CHUSETTS, MARYI	AND,
	MICH	HIGAN, MAIN	E, MINN	NESOTA,	MISSISSIPPI, MI	SSOURI, NEW JEF	SEY,
	NEW	MEXICO, NEW	YORK,	NEW HAM	SHIRE, NORTH CARC	LINA, NORTH DA	KOTA,
	OHIC	, OKLAHOMA,	OREGON	, PENNSY	LVANIA, RHODE ISL	AND, SOUTH CARO	LINA,
ĺ	TENN	JESSEE HTAI	UTDC	TNITA WAY	CHINCTON WEST V	TRCINIA MISCON	JSTN I

	. 11	Fundraising Events. Complete it more than \$15,000 of fundraising List events with gross receipts g	a event contribution	ns and gross income	on Form 990-EZ,	lines 1 and 6b.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add column (a) through column (c))
			(event type)	(event type)	(total number)	anough column (c)
	1	Gross receipts				
	2	Less Charitable contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes			· · · ··	
	5	Noncash prizes			·	_
	6	Rent/facility costs				
- 1	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary Add lines 4 th	3 ,,		•	
	11	Net income summary Combine line 3, c	olumn (d), and line 10		•	•
и	111	Gaming Complete if the organiz		es' to Form 990 Par	t IV line 19 or rer	orted more than
r	: III	Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a	ation answered 'Ye	es' to Form 990, Par	t IV, line 19, or rep	ported more than
_ 	: 111	Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a	ation answered 'Ye	(b) Pull tabs/Instant bingo/progressive bingo	t IV, line 19, or rep	(d) Total gaming (add column (a)
		Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a	ation answered 'Yea.	(b) Pull tabs/Instant bingo/progressive	,	(d) Total gaming (add column (a)
r	1	Gaming. Complete if the organiz \$15,000 on Form 990-EZ, line 6a	ation answered 'Yea.	(b) Pull tabs/Instant bingo/progressive	,	(d) Total gaming (add column (a)
		\$15,000 on Form 990-EZ, line 6a	ation answered 'Yea.	(b) Pull tabs/Instant bingo/progressive	,	(d) Total gaming (add column (a)
	1	\$15,000 on Form 990-EZ, line 6a Gross revenue Cash prizes	ation answered 'Yea.	(b) Pull tabs/Instant bingo/progressive	,	(d) Total gaming (add column (a)
	1 2	\$15,000 on Form 990-EZ, line 6a Gross revenue Cash prizes	ation answered 'Yea.	(b) Pull tabs/Instant bingo/progressive	,	(d) Total gaming
	1 2 3	\$15,000 on Form 990-EZ, line 6a Gross revenue Cash prizes Non-cash prizes	ation answered 'Yea.	(b) Pull tabs/Instant bingo/progressive	,	(d) Total gaming (add column (a)
	1 2 3 4	\$15,000 on Form 990-EZ, line 6a Gross revenue Cash prizes Non-cash prizes Rent/facility costs	ation answered 'Yea.	(b) Pull tabs/Instant bingo/progressive	,	(d) Total gaming (add column (a)
	1 2 3 4 5	S15,000 on Form 990-EZ, line 6a Gross revenue Cash prizes Non-cash prizes Rent/facility costs Other direct expenses	ation answered 'Yea. (a) Bingo Yes No	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a)
	1 2 3 4 5	Gross revenue Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor	Yes % No rough 5 in column (d)	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a)
EXPENSES	1 2 3 4 5 6 7 8	Gross revenue Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add lines 2 th	ation answered 'Yea. (a) Bingo Yes % No rough 5 in column (d) and	(b) Pull tabs/Instant bingo/progressive bingo Yes % No	(c) Other gaming	(d) Total gaming (add column (a)
EXPENSES	1 2 3 4 5 6 7 8 Ent	Gross revenue Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add lines 2 th Net gaming income summary Combine er the state(s) in which the organization of	Yes % No rough 5 in column (d) lines 1, column (d) and perates gaming activities	(b) Pull tabs/Instant bingo/progressive bingo Yes % No line 7	(c) Other gaming	(d) Total gaming (add column (a) through column (c)
EXPENSES a	1 2 3 4 5 6 7 8 Ent is til	Gross revenue Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add lines 2 th	Yes % No rough 5 in column (d) lines 1, column (d) and perates gaming activities	(b) Pull tabs/Instant bingo/progressive bingo Yes % No line 7	(c) Other gaming	(d) Total gaming (add column (a)

Sche	edule G (Form 990 or 990-EZ) 2012 ATLAS ECONOMIC RESEARCH FOUNDATION 94-2763845	Page 3
	Does the 'organization operate gaming activities with nonmembers? Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	No
13	Indicate the percentage of gaming activity operated in	
	a The organization's facility	96
	b An outside facility	કુ
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	
	Name •	
	Address	
15:	a Does the organization have a contact with a third party from whom the organization receives gaming revenue?	□No
	b If 'Yes,' enter the amount of gaming revenue received by the organization \$\sigma \sigma_{\text{\cong}} \sigma_{\text{\cong}} \text{\cong} and the amount	
	of gaming revenue retained by the third party > \$	
•	c If 'Yes,' enter name and address of the third party	
	Name •	
	Address	
16	Gaming manager information	
	Name •	
	Gaming manager compensation ► \$	
	Description of services provided	-
	Director/officer Employee Independent contractor	
17	Mandatory distributions	
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the	□
1	state gaming license?	∐ No
	organization's own exempt activities during the tax year	
Pa	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2 columns (III) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also computing part to provide any additional information (see instructions).	rb, olete
		_
		
_		
BAA	A TEEA3703 01/07/13 Schedule G (Form 990 or 990	-EZ) 2012

SCHEDULE I

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

1545-0047	112
OMB No	20

Open to Rublic Inspection

Employer identification number 94-2763845 ATLAS ECONOMIC RESEARCH FOUNDATION

Part I | General Information on Grants and Assistance Name of the organization

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

% × Yes

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

	iol di ja localpici					2	
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ACTON INSTITUTE	6689666-88	501(0)3	000.02				ECONOMIC EDUCA
LUT.	7071657						GOING TENING
H	91-0973976		10.000				ECONOMIC EDUCA
<u>TON EOU.</u> 	23-7069236		10,000				ECONOMICEDUCA
	94-2763845		35,313.				ECONOMIC EDUCA
TE 422	54-1901356		19,198.				ECONOMIC EDUCA
A <u>T ION.</u> 14 – – .	26-3783048		.005,5				ECONOMIC EDUCA
(8) ILLINOIS POLICY INSTITUTE190-S LASALLE ST STE 2130. CHICAGO IL 60603	41-2057028	501(C)3	.000,6				ECONOMIC EDUCA
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	3) and government o	rganizations listed in	the line 1 table			•	

Schedule I (Form 990) (2012)

TEEA3901 11/30/12

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 3 Enter total number of other organizations listed in the line 1 table

Continuation Sheet for Schedule I (Form 990)

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

2012

of, 2

Continuation Page 1

ECONOMIC EDUCA ECONOMIC EDUCA Schedule I Cont (Form 990) 2012 ECONOMIC EDUCA (h) Purpose of grant or assistance Employer identification number Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (g) Description of non-cash assistance 94-2763845 (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance 25,000. (d) Amount of cash grant 75,000. 85,278. 9,800. 12,000 5,164 10,000 13,925 15,000 10,000 TEEA4001 12/10/12 (c) IRC section if applicable 501(C)3 501(C)3 501(C)3 501(C)3 501(C)3 501(C)3 501(C)3 501(C)3 501(C)3 94-3008370 26-4057885 11-3792466 94-3435899 45-2637507 52-1455677 30-0144364 38-2701547 35-1320021 (P) EIN ATLAS ECONOMIC RESEARCH FOUNDATION 207 N. CHESTNUT ST_#200___ 1002_WISCONSIN_AVE.NW____ FOUNDATION_FOR_GOVERNMENT_ FREE TO CHOOSE NEIWORK ---8335_ ALLISON POINTE TRAIL (a) Name and address of organization or government INTERNATIONAL EREEDOM EDU MACKINAC CENTER FOR PUBLI MOVING PICTURE INSTITUTE STUDENTS FOR LIBERTY --INDEPENDENT INSTITUTE. -INDIANAPOLIS IN 46250 INTELLECTUAL TAKEOUT ARLINGTON VA 22216 2002 FILMORE AVE _ 375 GREENWICH ST. -NEW YORK NY 10013 MIDLAND MI 48640 OAKLAND CA 94621 PSSI_WASHINGTON 100 SWAN WAY ___ <u>PO_BOX_9925____</u> MCLEAN VA 22102 CHASKA MN 55318 NAPLES FL 34119 LIBERIY FUND --140 W_MAIN_ST__ PQ_BOX_17321___ SUITE_201-279__ **ERIE PA 16506** WASH DC 20007 Name of the organization

Continuation Sheet for Schedule I (Form 990)

 Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

2012

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Continuation Page 2

Schedule I Cont (Form 990) 2012 ECONOMIC EDUCA ECONOMIC EDUCA ECONOMIC EDUCA ECONOMIC EDUCA ECONOMIC EDUCA (h) Purpose of grant or assistance Employer identification number Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (g) Description of non-cash assistance 94-2763845 (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance (d) Amount of cash grant 10,000. 15,000 9,000 6,100 23,000 TEEA4001 12/10/12 (c) IRC section if applicable 501(C)3 501(C)3 501(C)3 501(C)3 501(C)3 75-1804932 27-4737588 91-1752769 45-3960140 20-1599637 (p) EIN ATLAS ECONOMIC RESEARCH FOUNDATION NATIONAL CENTER FOR POLIC 3328_OAKHURST_AVE_APT_204_ (a) Name and address of organization or government THE AMERICAS FORUM FOR ER WASHINGTON POLICY CENTER 12770_COIT_RD_STE_800___ 1351 I_ST_NW_ST_275_ LOS ANGELES CA 90034 THE BASTIAT SOCIETY 3404_4TH_AVE_S____ 180 SPRING ST. _____ WASHINGTON DC 20005 TALIESIN NEXUS SEATTLE WA 98134 DALLAS TX 75251 Name of the organization 1 1 1

94-2763845

FOUNDATION ATLAS ECONOMIC RESEARCH Schedule I (Form 990) (2012)

Part III

- (B) "INTELLECTUAL ENTREPRENEURS" EMBARKING ON THE CREATION OF SUCH ORGANIZATIONS, AND (C) SCHOLARS WORKING ON FIELDS OF INTELLECTUAL - EXCEPT FOR THOSE INSTANCES IN WHICH ATLAS'S GRANTS REPRESENT PRIZES TO RECOGNIZE OUTSTANDING WORK (ALREADY COMPLETE OR ONGOING) IN THE __ATLAS RELIES ON THE GRANTS COMMITTEE OF ITS BOARD OF DIRECTORS TO PROVIDE OVERSIGHT OF THE WORK OF ATLAS STAFF IN ESTABLISHING THE ELIGIBILITY _ AND APPROPRIATENESS OF CANDIDATES FOR GRANTS WITHIN ATLAS PROGRAMS _ATLAS SUPPORTS (A) ORGANIZATIONS THAT OPERATE AS NON-PROFIT RESEARCH INSTITUTES. __INQUIRY RELEVANT TO ATLAS PROGRAMS. GRANTEES RECEIVING \$5,000 OR MORE FROM ATLAS MUST PROVIDE REPORTS REGARDING THE USE OF FUNDS. Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other ε N/A N/A N/A Method of valuation (book, FMV, appraisal, other) N/A N/A N/A • 0 0 (d) Amount of non cash assistance - FIELD OF ENDEAVOR CENTRAL TO THE ATLAS MISSION. 11,000 118,913 1,350 (c) Amount of cash grant 25 (b) Number of recipients additional information (a) Type of grant or assistance 2 RESEARCH FELLOWSHIPS GRANTS Pt_L_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 Pt_I_Line_2 3 TRAVEL 1 PRIZES Part IV 4 S 9

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.
 Attach to Form 990.
 See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

ATLAS ECONOMIC RESEARCH FOUNDATION

Employer identification number 94-2763845

Par	t I Questions Regarding Compensation			
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e g , maid, chauffeur, chef)			
	crostation (e.g., maid, crostation, crost,			
ŧ	olf any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain	1 b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	4 a		Х
t	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4 b		Х
(Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		Х
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
ā	The organization?	5 a		Х
t	Any related organization?	5 b		Х
	If 'Yes' to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
ā	The organization?	6a		Х
t	Any related organization?	6 b		Х
	If 'Yes' to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III	7		Х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53 4958-4(a)(3)?			
_	If 'Yes,' describe in Part III	8	 	X
9	If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	۵	1	

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Schedule J (Form 990) 2012 ATLAS ECONOMIC RESEARCH FOUNDATION

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual

		(B) Breakdown of	B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus and incentive compensation	(III) Other reportable compensation	and otner deferred compensation	Denents	columns(B)(I)-(U)	reported as deferred in prior Form 990
ALEJANDRO CHAFUEN] (J)	159,767.	0		0	5,278	-165,045	0 1
1 PRESIDENT, DIRECTOR	€		0.	0		0		0
BRADLEY LIPS] ())	203,951.	0	. 	0	5,609	209,560.	
2 CEO/SECRETARY	(ii)		0.			0		0.
	(6)	175,000.	0	0	0	1,013.	[-176,013]	0
3 VP/INTL PROGRAMS	(ii)		0.			0		0.
	(0)							
4	(E)	i						
	ω							
5	(ii)							
	Θ		1					
9	(ii)							
	ω							
7	(ii)							
	(1)							
8	(ii)	 						
	Θ	1			1		1 1 1 1	
6	(E)							
	Θ	 	 	. 1			 	1 1 1 1 1 1
10	€							
	<u> </u>	 	 	 	 	1 1 1		
11	€							
	Ξ	!	 	1 1 1 1 1	1 1 1 1			
12	€							
	1	 	 	 	 		1	
13	€		-					
	(E)	1	1 1 1 1 1	 	1 1 1	1 1 1	 	1 1 1 1 1
14	(ii)							
	1	 	 	 	 	 	1	
15	_						:	
	<u> </u>				 	1 1 1 1 1 1	 	1 1 1 1 1 1 1 1
	(E)		- 1					
ВАА			TEEA4102 12/11/12	12			Schedule J	Schedule J (Form 990) 2012

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Schedule J (Form 990) 2012

SCHEDULE M (Form 990) `

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

OMB No 1545-0047

2012

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

Open To Public Inspection

Employer identification number

	AS ECONOMIC RESEARCH FOUNDATION				94-2763	3845		
Par	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribut amounts reporte on Form 990, Part VIII, line 1	a nonc	(d) Method of d eash contrib	etermın	ing mounts
1	Art – Works of art							
2	Art – Historical treasures							
3	Art - Fractional interests		-					
4	Books and publications							
5	Clothing and household goods					-		
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded	X	4	31,6	87. FAI	R MARKE	T VA	LUE
10	Securities - Closely held stock							
11	Securities — Partnership, LLC, or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution — Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate – Residential							
16	Real estate — Commercial							
17	Real estate – Other		-					
18	Collectibles							
19	Food inventory							•
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							-
23	Scientific specimens							
24	Archeological artifacts							
25	Other • ()							
26	Other • ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Dones	on during the	tax year for contribution	ons for which the	29			0.
	,		94			·	Yes	<u>∪ ·</u> No
	_						103	.,,
30a	During the year, did the organization receive by co- hold for at least three years from the date of the in- purposes for the entire holding period?	ntribution an aitial contribu	ly property reported in lition, and which is not r	Part I, lines 1-28 the required to be used	at it must for exemp	ot 30 a	-	X
b	If 'Yes,' describe the arrangement in Part II							
	Does the organization have a gift acceptance police	•	•		utions?	31	X	
	Does the organization hire or use third parties or renoncash contributions?	elated organi	izations to solicit, proce	ess, or sell		32 a		X
_	If 'Yes,' describe in Part II		_					į
33	If the organization did not report an amount in colu	umn (c) for a	type of property for wh	nich column (a) is o	checked,			
	describe in Part II		<u>. </u>					

Schedule	M (Form 990) 2012	ATLAS ECON	OMIC RESEARC	H FOUNDATION		94-2763845	Page 2
Part II	and whether the received, or a control of the contr	i formation. Col organization is ombination of	mplete this part to s reporting in Par both. Also comp	o provide the inform of I, column (b), the olete this part for	mation required by Pa le number of contribution any additional infor	art I, lines 30b, 3 utions, the numb mation.	er of items
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2012

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ. Inspection Name of the organization Employer identification number 94-2763845 ATLAS ECONOMIC RESEARCH FOUNDATION Pt_VI, Line 11b A DRAFT OF THE FEDERAL 990 IS REVIEWED BY THE AUDIT _____COMMITTEE. THE AUDIT COMMITTEE HAS BEEN DELEGATED THIS AUTHORITY BY THE GOVERNING BODY. Pt_VI,_Line 2 ___GERRY_OHRSTROM_IS_THE_NEPHEW_OF_BILL_SUMNER.______ Pt_VI,_Line_12c__OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED ANNUALLY ____ TO SIGN STATEMENTS DISCLOSING CONFLICTS OF INTEREST. Pt_VI,_Line_15a __ATLAS_HAS_A COMPENSATION COMMITTEE THAT IS COMPOSED OF ____INDEPENDENT PERSONS. DECISIONS OF THE COMMITTEE ARE ____BASED ON COMPARATIVE ANALYSIS OF COMPENSATION LEVELS AND ____ TRENDS AT PEER NON-PROFIT INSTITUTIONS. Pt_VI,_Line_19___ATLAS_POSTS_ITS_FORMS_990_AND_AUDITED_FINANCIAL_STATEMENTS_ON_____ _____ITS WEBSITE. IT DOES NOT MAKE ITS GOVERNING DOCUMENTS OR CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC. Pt_VI, Line 15b _ ATLAS HAS A COMPENSATION COMMITTEE THAT IS COMPOSED OF ______ INDEPENDENT PERSONS. DECISIONS OF THE COMMITTEE ARE ____BASED_ON_COMPARATIVE ANALYSIS OF COMPENSATION LEVELS AND TRENDS AT PEER NON-PROFIT INSTITUTIONS. PAGE 2, PART III "THE MISSION OF ATLAS IS TO STRENGTHEN THE WORLDWIDE FREEDOM ______MOVEMENT BY SUPPORTING INDIVIDUALS AND ORGANIZATIONS WITH THE POTENTIAL TO CHAMPION ITS VISION OF A FREE, PROSPEROUS AND PEACEFUL SOCIETY. THE VISION OF THE ORGANIZATION IS THAT THERE WILL BE EFFECTIVE INDEPENDENT ORGANIZATION IN EVERY COUNTRY BUILDING A PUBLIC CONSENSUS AROUND THE PRINCIPLES THAT FOSTER FREEDOM, ECONOMIC OPPORTUNITY, PROSPERITY AND PEACE. THESE PRINCIPLES INCLUDE INDIVIDUAL LIBERTY AND RESPONSIBILITY,

PROPERTY RIGHTS, FREE MARKETS AND LIMITED GOVERNMENT UNDER

Name of the organization	990-EZ) 2012	Page 2
-	RESEARCH FOUNDATION	Employer identification number 94-2763845
	THE RULE OF LAW. ATLAS ACCOMPLISHES THIS VIA	EDUCATIONAL
	PROJECTS, TRAINING WORKSHOPS, GRANTS AND PRIZE	PROGRAMS,
	AND SERVICES THAT FOSTER COLLABORATION AMONG T	HINK TANKS
	_ THAT PERFORM AND PROMOTE POLICY RESEARCH TO IM	PROVE THE
	CLIMATE_OF_IDEAS."	
PART_VI,_SECTION	_C_LINE_17ALABAMA, ALASKA, ARKANSAS, CALIFORNI.	A, COLORADO,
	CONNECTICUT, DISTRICT OF COLUMBIA, FLORIDA, GEO	ORGIA, ILLINOIS,
	_ KANSAS, KENTUCKY, LOUISIANA, MASSACHUSETTS, MA	RYLAND, MICHIGAN,
	MAINE, MINNESOTA, MISSISSIPPI, MISSOURI, NEW J	ERSEY, NEW MEXICO,
	NEW YORK, NEW HAMSHIRE, NORTH CAROLINA, NORTH	DAKOTA,
	_OHIO, OKLAHOMA, OREGON, PENNSYLVANIA, RHODE IS	LAND, SOUTH CAROLINA,
	TENNESSEE, UTAH, VIRGINIA, WASHINGTON, WEST VI	RGINIA, WISCONSIN.
AMENDED 990	AN AMENDED FEDERAL 990 WAS FILED TO CORRECT PA	GE_TEN,_STATEMENT
	OF_FUNCTIONAL_EXPENSES,_LINES_11E_AND_11GAL	SO, SCHEDULE G
	_ WAS ADDED TO THE AMENDED 990 TO REFLECT PROFESSION	NAL FUNDRAISING ACTIVITIES,
	_AND_SUPPLEMENTAL_INFORMATION_WAS_INCLUDED_TO_S	CHEDULE D
	PART_XIII_TO_REFERENCE_FIN_48_(ASC_740)_FOOTNO	TE_TEXT.
		
		
		