Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047 Open to Public Inspection

Fo	r the 20	00 calendar year, OR tax year period beginning	and (	ending		-		<del></del>
Che	ock if	C. Name of organization	annom on time	7 LIP		D Empl	byer iden	tification number
	olicable Chance o	USE IRSTHE CENTER FOR THE RE	SPECT OF LIFE	AND	ļ	5.2	-152	0451
	Change o address	print or ENVIRONMENT				-		
	Change o name Initial	Mullipar and Street (or F.O. box it mains not	delivered to street address)		Room/suite		hone nun	52-1100 <u> </u>
_	retum	Specific 2100 L STREET, N.W.	<del></del>			F Checi		if application pending
=	Final return	tions   City or town, state or country, and ZIP	r			r Gileci	_	
_	Amended return			T/H 3	nd I are not applica	l ahla to s	action 52	7 oras \
	(use also state rep	orting)	(inner no.) [ 527		is this a group rete			Yes X N
10	ganizat	ion type (check only one) X 501(c) (3)	(msert no.) L 527		it "Yes," enter num			
_ ,		OR 4947(a)(1) 1 501(c)(3) organizations and 4947(a)(1) nonexer	not charitable trusts		Are all affiliates inc			Yes X N
m:	section ist atta	ach a completed Schedule A (Form 990 or 900-E	Z).	] ''\''	(If "No." affach a lis			
Ac	counting			H(d)	Is this a separate :	return fil	ed by an	
me	thod:	Cash / Actival Content (Aposity)		- ' '	organization cover			ing? 🔲 Yes 🗶 N
Ch	ack hara	if the organization's gross receipts are norma	ally not more than \$25,000. The	Ĺ	Enter 4-digit group			
OFO	oiteriae Aiteriae	n need not file a return with the IRS, but if the organization	in received a Form 990 Package	L	Check this box if t			
ภาษู ก t	amzano he mail.	it should file a return without financial data. Some states	require a complete return.		attach Schedule B	(Form !	990 or 990	)-EZ) 🕨 🛄
		Revenue, Expenses, and Changes in N		ilanc	es			
Ť	1	Contributions, gifts, grants, and similar amounts receive					.	
		Direct public support		a	331,5			
	b	Indirect public support		b	812,9	08.		
	c	Government contributions (grants)	<u>1</u>	<u> </u>				
1	d	Total (add lines 1a through 1c)						
		(cash \$ 1,144,482. noncash \$	)				16	1,144,482
ļ	2	Program service revenue including government fees and	i contracts (from Part VII, line 9:	3)			2	
-	3	Membership dues and assessments				-	3	<u> </u>
-	4	Interest on savings and temporary cash investments					4	
-	5	Dividends and interest from securities		_ i			5	·
-	6 a	Gross rents	· · · · · · · · · · · · · · · · · · ·	ia				
	b	Less: rental expenses		ib <u>i</u>	<del>_</del>			
.	C	Net rental income or (loss) (subtract line 6b from line 6a	ı)				<u>6c</u>	
שמפווחפ	7	Other investment income (describe	<del></del>				7	
<u>:</u>	8 a	Gross amount from sale of assets other	(A) Securities		(B) Other			
		than inventory	<del></del>	Ba			1	
1	þ	Less: cost or other basis and sales expenses		3b				
	C	Gain or (loss) (attach schedule)		3c			8d	
	đ	Net gain or (loss) (combine line 8c, columns (A) and (B	))			•	- Ou	
	9	Special events and activities (attach schedule)	4 4 to 41					
	2	Gross revenue (not including \$	6	n_				
		reported on line 1a)		9 <b>a</b> 9b				
	þ	Less: direct expenses other than fundraising expenses			<del></del>	-	9c	
	C	Net income or (loss) from special events (subtract line				•		
	10 a	Gross sales of inventory, less returns and allowances		0a 0b			'.	
	b	Less: cost of goods sold					10c	
	C	Gross profit or (loss) from sales of inventory (attach so				•	11	61,111
	11	Other revenue (from Part VII, line 103)					12	1,205,593
4	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10	ro <sub>i</sub> and in the control of the cont	· ·-	<u></u>	·	13	780,537
ខ្ល	13	Program services (from line 44, column (B))	Diameter Comment				14	124,791
Expenses	14	Management and general (from line 44, column (C))	1 1-4505		· · · · · · · · · · · · · · · · · · ·		15	300,265
3	15	Fundraising (from line 44, column (D))	18	B	<del>-</del>	•	16	
ַ נ	16	•	/\$/JUN ~	~~~;	:://		17	1,205,593
_	17	Total expenses (add lines 16 and 44, column (A))	J12) W 13 20c	<del>. /</del> è	<u> </u>	<u>·-</u> _	18	0
s	18	Excess or (deficit) for the year (subtract line 17 from lin Net assets or fund balances at beginning of year (from Other changes in net assets or fund balances (attach ex-	100 73 COMPANY	1/0	<b>'</b> /···		19	0
-	19	Net assets or fund parameter at beginning of year (from	A JOSEPH	٦ğ	/		20	0
Set	20	INDER CHANGES IN DEL ASSELS OF JUITO DAIANCES (ALLACH E)	pianation) - V. J. S	/				0
Asset	21	Net assets or fund balances at end of year (combine lin	as 18 19 and 201	- 1			21	U

		ns must complete column ( ons and section 4947(a)(1)			n 501(c)(3) and
Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	:::	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule)					
cash \$ 7,600 - noncash \$	22	7,600.	7,600.	Statement 2	
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc	25	0.	0.	0.	0.
26 Other salaries and wages	26				
27 Pension plan contributions	27				<u>.                                    </u>
28 Other employee benefits	28				
29 Payroll taxes	29				
30 Professional fundraising fees	30				
31 Accounting fees	31				
32 Legal fees	32				
<b>33</b> Supplies	33	8,136.	8,136.		
34 Telephone	34	6,314.	6,314.		
35 Postage and shipping	35	7,000.	7,000.		
<b>36</b> Occupancy	36	312.	312.		
37 Equipment rental and maintenance	37				
38 Printing and publications					
39 Travel		216,447.	216,447.		
40 Conferences, conventions, and meetings			•		
41 Interest	41			-	
42 Depreciation, depletion, etc. (attach schedule)	42				
43 Other expenses (itemize)					
a	43a				]
b	43b				
c	43c				
d	43d				
e See Statement 1	43e	959,784.	534,728.	124,791.	300,265
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	1,205,593.	780.537.	124,791.	300,265
Reporting of Joint Costs. Did you report in column (B) fundraising solicitation?					Yes X No
if "Yes," enter (i) the aggregate amount of these joint co					
(iii) the amount allocated to Management and general 3	\$	; and (iv			
Part III Statement of Program Serv	ice Ad	complishments			
What is the organization's primary exempt purpose?	•				
ANIMAL AND ENVIRONMENTAL	PRO	TECTION.			Program Service Expenses
All organizations must describe their exempt purpose achievement achievements that are not measurable. (Section 501(c)(3) and (4) of					(Required for 501(c)(3) and
allocations to others.)	rgaziizatio	ans and 4547(agr) nonexempt can	antable ousts must also eme	a die zarodini organia za d	(4) orgs., and 4947(a)(1) trusts but optional for others.
a GENERAL ACTIVITIES TOW.					
ENVIRONMENTAL AND ANIM	AL W	ELFARE CONCE	RNS, DISTRI	BUTION OF	]
PRINTED AND OTHER MATE	RIAL	S IN FURTHER	ANCE OF THE		]
PURPOSES.		(Gr	ants and allocations \$	7,600.	780,537.
b					1
					]
					1
		(Gr	ants and allocations \$	}	
c					
					_
		(Gr	ants and allocations \$	)	
d					
<del></del>					1
		/Gr	ants and allocations \$	1	1
e Other program services (attach schedule)			ants and allocations \$	1	
f Total of Program Service Expenses (should equal	line 44.			<b></b>	780,537.
023011		2			Form 990 (2000

		re required, attached schedules and amounts with Id be for end-of-year amounts only.	nin the	description column	(A) Beginning of year		(B) End of year
				-			
4	5	Cash - non-interest-bearing				45	
4	6	Savings and temporary cash investments				46	
	17 a	Accounts receivable	478				
	b	Less: allowance for doubtful accounts	47b			47c	
4	18 a	Pledges receivable	482				
	b	Less: allowance for doubtful accounts	48b			48c	
4	19	Grants receivable				49	
:	50	Receivables from officers, directors, trustees,					
		and key employees	1			50	
Siece C	51 a	Other notes and loans receivable	51a				
₹	b	Less: allowance for doubtful accounts	516	<u> </u>	<u> </u>	51c	
1	52	Inventories for sale or use				52	<del>_</del>
1	53	Prepaid expenses and deferred charges				53	<del></del>
5	4	Investments • securities		Cost FMV	<del></del> -	54	
5	55 a	investments - land, buildings, and	1				
		equipment basis	55a				
	b	Less: accumulated depreciation	55b	<del></del>		55c	
	56	Investments - other	1 '			56	
1	57 a	Land, buildings, and equipment, basis	57a			57c	
		Less accumulated depreciation	57b	<del></del>		58	
-   1	58	Other assets (describe			<del></del>	130	·
	59	Total assets (add lines 45 through 58) (must equal lin	ne 74)		0	- 59	0
	60	Accounts payable and accrued expenses			<u> </u>	60	
	61	Grants payable				61	
- 1	52 52	Deferred revenue				62	
Ĭ	63	Loans from officers, directors, trustees, and key empl	oyees	[		63	
וס		Tax-exempt bond liabilities	•			64 a	
-		Mortgages and other notes payable				64b	
- 1,	65	Other liabilities (describe		) [		65	
	66	Total liabilities (add lines 60 through 65)		<u></u>	0	- 65	0
	Orga	nizations that follow SFAS 117, check here 🕨 🔃	and co	emplete lines 67 through		<u> </u>	
		69 and lines 73 and 74				1	
<b>8</b>	67	Unrestricted				67	<del></del>
	68	Temporarily restricted				58	· · · · · · · · · · · · · · · · · · ·
20	69	Permanently restricted	·			69	
בַ	Orga	nizations that do not follow SFAS 117, check here 🕨	<u>[X]</u>	and complete lines			
Net Assets or Fund Balances		70 through 74			^		•
S	70	Capital stock, trust principal, or current funds			0	+ +	
Ď l	71	Paid-in or capital surplus, or land, building, and equip			0		
₹	72	Retained earnings, endowment, accumulated income,			0	. 72	0
<b>8</b>	73	Total net assets or fund balances (add lines 67 throu			•		^
		column (A) must equal line 19 and column (B) must e			0	$\rightarrow$	0
	74	Total liabilities and net assets / fund balances (ad	d lines (	66 and 73)	0	- 74	0

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

Form 990 (2000)

Part IV-A Reconciliation of Rev Financial Statements Return	enue with	e per Audited h Revenue per	Pari	Financi Return	iliation of Exp al Statements	enses per A With Exper	ludited Ises per 
a Total revenue, gains, and other support		a 1,205,593	a	Total expenses and lo		<b>)</b> 1	205,593
per audited financial statements	<b>-</b>	a 1,203,333	ь	audited financial state Amounts included on	line a but not on		
h Amounts included on line a but not on line 12, Form 990:			41	line 17, Form 990: Donated services			
1) Net unrealized gains			'''	and use of facilities	\$		
on investments\$			(2)	Prior year adjustment	ts		
2) Donated services	İ			reported on line 20,			
and use of facilities \$	i				\$		
3) Recoveries of prior			(3)	Losses reported on line 20, Form 990	\$		
year grants \$			40	Other (specify):	•		
s Conter (specify).			'''	other (speaky).	s	' '	
Add amounts on lines (1) through (4)		b	-	Add amounts on line	s (1) through (4)		
Line a minus line b		c 1,205,593	. c	Line a minus line b		. 1 •	,205,593
Amounts included on line 12, Form 990 but not on line a:			d	Amounts included or 990 but not on line a			
1) Investment expenses			} (1)	Investment expenses not included on	•		
not included on line 6b, Form 990 \$				line 6b. Form 990	s		
2) Other (specify):			(2)	Other (specify)	▼		
S			'-'	other (opening)	\$		
Add amounts on lines (1) and (2)		d	-	Add amounts on line	s (1) and (2)	▶ ₫	
Total revenue per line 12, Form 990			e	Total expenses per li		1	
(line c plus line d)	<u> </u>	e  1,205,593	<u>.</u>	(line c plus line d)	<u>.</u>	▶ e 1	<u>,205,59</u>
ert V List of Officers, Directo	ors, T	rustees, and Key	Empl	oyees (List each or itle and average hours	ne even if not comper	1Sated.)	o (E) Expen
(A) Name and add			P	er week devoted to position	(C) Compensation (if not paid, enter -0)	employee benefit plans & deferred compensation	account ar other allowar
ee Statement 3							
		_	<del></del> -				<del> </del>
<b>-</b>			·				
				-			
<b></b>			.				
		<del>_</del>	+	<del></del> -	<del> </del>	<del></del>	
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			•				
. <b></b>	<del>-</del>		-				
<del> </del>			+-				
			.				
			.				
75 Did any officer, director, trustee, or key emplorganizations, of which more than \$10.000 v	loyee re	eceive aggregate compens	ation of	more than \$100,000 fr ? If "Yes," attach sched	rom your organization	and all related	Stmt Form

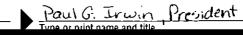
# THE CENTER FOR THE RESPECT OF LIFE AND

Form 9	90 (20	00) ENVIRONMENT	52-1520		_	Page 5
	t VI	Other Information		N/A	Yes	
76	Did the	organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each act	ivity	76_		X
77	Were a	iny changes made in the organizing or governing documents but not reported to the IRS?		77		X
		," attach a conformed copy of the changes.				v
		e organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	NI / N	78a		<u>X</u>
		Thas it filed a tax return on Form 990-T for this year?	N/A	78b		x
79	Was th	nere a liquidation, dissolution, termination, or substantial contraction during the year?		79		<b>-</b>
		," attach a statement.	nin			
80 a		organization related (other than by association with a statewide or nationwide organization) through common membersh	···ρ·,	8Da	X	1
		ning bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	ment 5	001		1
D	IT Yes	, enter the name of the organization See States  and check whether it is exempt OR		•. •	· .	
Q1 -	Entert	the amount of political expenditures, direct or indirect, as described in the			•	
014		ctions for line 81	0.			
b		e organization file Form 1120-POL for this year?		81b		X
82 a	Did the	e organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially le	ss than	·		ļ
	fair rer	ntal value?		82a		X
b	If "Yes	,* you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an	4-		٠.	
		se in Part II. (See instructions for reporting in Part III.)	N/A	'		i.
83 a		e organization comply with the public inspection requirements for returns and exemption applications?		831	X	<del> </del>
þ		e organization comply with the disclosure requirements relating to quid pro quo contributions?		83h 84a		X
84 a		e organization solicit any contributions or gifts that were not tax deductible?		044		1
Ь		,* did the organization include with every solicitation an express statement that such contributions or gifts were not	N/A	84b	 	
		ductible?		85a		<del>                                     </del>
85		e organization make only in-house lobbying expenditures of \$2,000 or less?	N/A	85b		1
b	If "Ves	s was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waive	r for proxy tax			11.11
		for the prior year.				
c		assessments, and similar amounts from members 85c	N/A	<u> </u>		
d		on 162(e) lobbying and political expenditures 85d	<u> N/A</u>			
e	Aggre	gate nondeductible amount of section 6033(e)(1)(A) dues notices	N/A			
f		ole amount of lobbying and political expenditures (line 85d less 85e)	N/A	<u> </u>		
g	Does	the organization elect to pay the section 6033(e) tax on the amount in 85f?	N/A	85g	-	+-
þ		tion 6033(e)(1)(A) dues notice were sent, does the organization agree to add the amount in 85t to its reasonable estimat	N/A	0Eh		
		able to nondeductible lobbying and political expenditures for the following tax year?	N/A	85h	<del> </del>	<del>                                     </del>
86		c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12  specials included on line 12 for public use of club facilities	N/A			
D		receipts, included on line 12, for public use of club facilities	N/A	1	14.	
87		s income from other sources. (Do not net amounts due or paid to other sources		1		
		st amounts due or received from them.)	N/A		75.73	
88	At any	y time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership,				
	or an	entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?				İ
	If "Yes	s,' complete Part IX		88	-	X
89 a	501(	c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under:	•			
	section	on 4911 ► 0 • ; section 4912 ► 0 • ; section 4955 ►	0.			· · ·
b		c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit		-		1
		action during the year or did it become aware of an excess benefit transaction from a prior year?		89b	1	X
		es, attach a statement explaining each transaction		030	1	
C		: Amount of tax imposed on the organization managers or disqualified persons during the year under	•			0.
		ons 4912, 4955, and 4958		_		0.
	List	the states with which a copy of this return is filed DISTRICT OF COLUMBIA				
90 a b	Numi	ber of employees employed in the pay period that includes March 12, 2000	90b			(
U	1401111					
91	The h	ooks are in care of CONTROLLER Telephone no.	<b>▶</b> (202)	452	<u>-1</u>	100
٠,						
	Locat	ted at ► PAGE ONE ADDRESS	_ ZIP code 🕨			
92	Sect	non 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here		 N	/ <b>/</b>	Ш
0200	and e	enter the amount of tax-exempt interest received or accrued during the tax year	92			0 (2000
02304 12-19	-00	)	HCDECO	701	(1) 331	∍ (2000 1

art VII Analysis of Income-P	roducing Activities		T <u>-</u>		<del></del>
er gross amounts unless otherwise	(A)	ited business income	(C)	y section 512, 513, or 514	(E)
cated.	Business	(B) Amount	Exclu-	(D) Amount	Related or exempt
Program service revenue:	code	Amount	sion		function income
	_		1		
				_	
Madroero Mardio ard povemente	<del></del>			-	
Medicare/Medicaid payments		- <del></del> -	_   _		_
Fees and contracts from government agen		<del></del>	<del> </del>		· · ·
Membership dues and assessments			<del></del>		
Interest on savings and temporary					
cash investments					
Dividends and interest from securities			<del></del>		30, [8] H. Harriston II
Net rental income or (loss) from real estate	P	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			<del></del>
debt-financed property					
not debt-financed property					<del></del>
Net rental income or (loss) from personal	property				
Other investment income		-			
Gain or (loss) from sales of assets				ľ	
other than inventory					
Net income or (loss) from special events	1				
Gross profit or (loss) from sales of inventi					
Other revenue:					
SALE OF LITERATURE					61,11
	- I				<del>_ = -</del>
·	!	<del>-</del>			
(5)		-	0 -	0.	61,11
Subtotal (add columns (B), (D), and (E))		<u></u>	<u> </u>		61,11
Total (add line 104, columns (B), (D), and				······································	
Line 105 plus line 1d, Part I, should	equal the amount on line	12, Part I.	met Burne		
art VIII Relationship of Activ	ities to the Accomp	Silstinetit of Exer	inpt Fuipe	363	4.11
ne No. Explain how each activity for which	h income is reported in colui	MR (E) OF PART VII CONTRO	итеа ітропапт	iy to the accomplishment o	n the organization's
exempt purposes (other than by p					
3a SALE OF LITERATU	RE - EARTH E	THICS			
			J . J . T All	<del></del>	
art IX Information Regardir			iraea Entii	iles (n)	/E\-
(A) Name, address, and EIN of corporation,	(8) Percentage of	(C) Nature of activities		(D) Total income	(E) End-of-year
	ownership interest				assets
'A	%				
	%				
	%				
	%	<del></del>			

ng accompanying schedules and statements, and to the best of my knowledge and belief, it is true, n all information of which preparer has any knowledge. (Important: See General Instruction W.)





#### **SCHEDULE A**

(Form 990 or 990-EZ)

# Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

THE CENTER FOR THE RESPECT OF LIFE AND ENVIRONMENT

Employer identification number 52 1520451

Part I: Compensation of the Five Highest Pa (See instructions. List each one. If there are none, enter	id Employ 'None.')		icers, Directo		
(a) Name and address of each employee paid more than \$50,000	·	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and othe allowances
NONE					
	. <b></b>				
				-	
	· <b>-</b>	-			
Total number of other employees paid					
over \$50,000  Part II Compensation of the Five Highest Part	aid Indepe	ondent Contractors		al Services	
(See instructions. List each one (whether individuals or  (a) Name and address of each independent contract			(b) Type of	service	(c) Compensation
None					
			<del>-</del>		
	<b>·</b>				
Total number of others receiving over \$50,000 for professional services		0			

For Paperwork Reduction Act Notice, see page 1 of the Instructions for Form 990 and Form 990-EZ. LHA

Schedule A (Form 990 or 990-EZ) 2000

023111

8

Pa	TT IV-A Support Schedule (C	Complete only if you chec he workshee <u>t in the instru</u>	ked a box on line 10, ctions for converting	11, or 12.) <b>Use cash r</b> from the accrual to the	method of acco e ca <u>sh</u> method o	unting of accou	unting
<u>egir</u>	ndar year (or fiscal year nning in)	(a) 1999	(b) 1998	(c) 1997	(d) 1996		(e) Total
15	Gifts, grants and contributions received (Do not include unusual grants. See line 28.)	1,082,235.	377,620.	614,176.	416,2	51.	2,490,282.
<u>16</u> 17	Membership fees received  Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose		265,169.				282,655.
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975						
19	Net income from unrelated business	s					
	activities not included in line 18						
20	Tax revenues levied for the organization's penefit and either paid to it or expended on its behalf						
21	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge						
22	Other income. Attach a schedule. Bo not include gain or (loss) from sale of capital assets.						
23	Total of lines 15 through 22	1,099,721.	642,789.	614,176.	416,2		2,772,937.
24	Line 23 minus line 17	1,082,235.	377,620.	614,176.	416,2		2,490,282.
25	Enter 1% of line 23	10,997.	6,428.	6,142.	4,1	63. 26a	49,806.
26 b	Organizations described on lines of Attach a list (which is not open to p governmental unit or publicly support lines 26a. Enter the sum of all these	ublic inspection) showing th orted organization) whose to	e name of and amount o tal gifts for 1996 throug	ontributed by each perso	ount shown	26b	535,776.
c	Total support for section 509(a)(1) Add: Amounts from column (e) for	lines: 18	19		<b>&gt;</b>	26c	2,490,282. 535,776.
		<del></del>	·	535,7		26d 26e	1,954,506.
e	Public support (line 26c minus line				_	261	78.4853%
<u>†</u> 27	Public support percentage (fine 2) Organizations described on line 1:						
e r	to public inspection) to show the na (1999) N/A	ame of, and total amounts re (1998) that was received from a noi	ceived in each year from ) ndisqualified person, atta	i, each "disqualified perso 1997) ich a list to show the nan	on." Enter the sum  ne of, and amount	of such (1996) received	amounts for each year d for each year,
	individuals ) After computing the di excess amounts) for each year:	Herence between the amoun $N/A$	t received and the larger	amount described in (1)	or <b>(2)</b> , enter the s	um of th	ese differences (the
	(1999)			1997)		(1996)	
C	Add: Amounts from column (e) for	lines: 15		16		امتا	N/A
		20	e 27h total			27c 27d	N/A
d	Add: Line 27a total Public support (line 27c total minu:				<b>`</b>	27e	N/A
f	Total support for section 509(a)(2)	•			N/A		·
					<b>.</b>	27g	N/A %
	Investment income percentage				orj) 🕨	27h	N/A %
28	Unusual Grants: For an organization public inspection) for each year show these grants in line 15 (See page 5 o	on described in line 10, 11, o ring the name of the contribu	r 12 that received any u	nusual orants during 199	96 through 1999, description of the	attach a e nature	list (which is not open to of the grant. Do not includ

Parl	Private School Questionnaire (To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/	A	
			Yes	No
9	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing			
	instrument, or in a resolution of its governing body?	29		
0	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues.	30		:•
	and other written communications with the public dealing with student admissions, programs, and scholarships?	30		-
1	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of			
	solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known	31	٠.	1
	to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No." please explain. (If you need more space, attach a separate statement )			
			;; .	
2	Does the organization maintain the following:	32a		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?			
þ	Records documenting that scholarships and other financial assistance are awarded on a racially	32b		
	nondiscriminatory basis?			
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student	320		
	admissions, programs, and scholarships?	32d		1
d	Copies of all material used by the organization or on its behalf to solicit contributions?  If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
	If you answered "No" to any of the above, please explain (if you need those space, didon a separate statement)			
			1	
	Does the organization discriminate by race in any way with respect to	1		
33		33a	Ļ.,	<u> </u>
3		33b	Ь.	<u> </u>
b	Admissions policies?	33c	<u> </u>	
ď	Scholarships or other financial assistance?	33d	↓	
u e	Educational policies?	33e	ļ	<del></del>
- 1	Use of facilities?	33f	↓_	<b>-</b>
ď	Athletic programs?	<u>33g</u>	↓	<del> </del>
y h	Other extracurncular activities?	33h	ļ	
"	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
			1	
			.	1.
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	342		<b>-</b>
54 a b	at the state of th	34b	4	
J	16 year and and Types to other 3.45 or b. please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50,			
	1075-2 C.B. 597, covering racial neediscrimination? If "No " attach an explanation	35		

Schedule A (Form 990 or 990-EZ) 2000

chedule A (Form 990 or 990-EZ) 2000 Part VI-A Lobbying Exp	enditures by Electing	g Public Chariti that filed Form 5768)	es					N/A
	ation belongs to an affiliated gr	OUD.			<u> </u>			
	d "a" above and "limited contro	ol" provisions apply.			<del></del> _			
	s on Lobbying Expe				(a) Affiliated gro	пр		(b) be completed for ALL ecting organizations
	xpenditures" means amounts p				totals		_ <del> </del> "	ecting organizations
(1119 (0111)	xpendicates				N/A		1	
5 Total lobbying expenditures to inf	tuence public opinion (grassro	ots lobbying)		36				
sa - Takal labbuing gypanditures to inf	huence a legislative body (direc	C TODOYING)		37				
and Tatal Johnwing expenditures (add	tines 36 and 37)	and the second second		38			$\dashv$	
utibnense avense evendfill	res	and the second second		39			_	
utibnenye ezonyun tomovo leto	es (add lines 38 and 39)	and the second of the second		40	<del> </del>		_	
11 Lobbying nontaxable amount. En	iter the amount from the follow	ing table -						
rain - ameura on line 40 is -	The lobbying non	JISYSDIR SIMORIII IS	`			٠		
Not over \$500,000	20% of the amount o	on line 40 \$500 000						
Over \$500 000 but not over \$1 000,000		of the excess over \$1,000.0	œ }	41		<del></del>		
Over \$1,000,000 but not over \$1,500.0 Over \$1,500,000 but not over \$17,000	5175,000 plus 1076 (	the excess over \$1,500,00	xo					
Over \$1,500,000 but not over \$17,000 Over \$17,000,000	,000 \$225,000 pius 378 0		J					
Over \$17,000,000	anter 25% of line 41)			42				
a	rter -N- if line 42 is more than li	ine 36		43				
43 Subtract line 42 from line 38. En	iter -0- if line 41 is more than li	ine 38		44				
Caution: If there is an amoun	nt on either line 43 or line 4	4, you must file Forπ	4720.	<u> </u>				
		Lobbying Exp			Averaging Pe	(d)		N/A
Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	19	•	1	997		Total
45 Lobbying nontaxable					1			0.
amount			<del> </del>					
46 Lobbying ceiling amount								0.
(150% of line 45(e))								
47 Total lobbying								0.
expenditures								0.
48 Grassroots nontaxable								<u> </u>
amount								0.
49 Grassroots ceiling amount (150% of line 48(e))				· · · · · · · · · · · · · · · · · · ·				
50 Grassroots lobbying			1					0.
			<u></u>					
m	Activity by Nonelection	ng Public Charl	ties			_		N/A
(For reporting o	nly by organizations that did no	ot complete Fait VI A)	ion including	any attemp	t to	Van	No	Amount
During the year, did the organizati	on attempt to influence national	ir, state of local logistat trough the use of:				Yes	1.50	
influence public opinion on a legis  a Volunteers						<u></u>		
a Volunteers	clude compensation in expens	es reported on lines c	through h)				<b>├</b> ─┤	
Paid staff or management (iii     Media advertisements						<u> </u>	<del>├</del> ──┼	
. As itis a sembore logicial	tors, or the public					<del> </del>	$\vdash$	
- Dublications or published Of	broadcast statements					-	<del>                                     </del>	
	for Johnving DUIDOSES			-		<u></u>	$\vdash \dashv$	
a	offic indemonstrate and a state of the	CIAIS, OT A legistative DO	ш <b>у</b>				+	
h Rallies, demonstrations, sem	ninars, conventions, speeches,	lectures, or any other i	neans					
i Total lobbying expenditures if "Yes" to any of the above,	· · · · · · · · · · · · · · · · · · ·					<u>.</u>		
I TOLD TODD J 9 - T	•	حجمته متحجمات المحازم فماسي	f the lobbying	activities				A (Form 990 or 990-EZ) 20

		rding Transfers To an	d Transactions and	d Relationships With No	ncharitat		rayeo
		ctly or indirectly engage in any of		r organization described in section			
		tion 501(c)(3) organizations) or		olitical organizations?			T
a Tr	ansfers from the reporting organ	rization to a noncharitable exemp	ot organization of:		ſ	Yes	
(	i) Cash					51a(i)	X
(i	i) Other assets					a(ii)	X
-	ther transactions:						ł
		with a noncharitable exempt org:	anization			b(i)	X
						b(ii)	X
•						b(iii)	X
•	•					b(iv)	X
	•					b(v)	X
•	v) Loans or loan guarantees					<del></del> -	X
•	•					b(vi)	
c S	haring of facilities, equipment, ma	ailing lists, other assets, or paid	employees			C	X_
d If	the answer to any of the above is	s "Yes," complete the following so	chedule. Column (b) should	always show the fair market value (	of the		
0	nods, other assets, or services di	iven by the reporting organization	n If the organization received	d less than fair market value in any			
		nt, show in column (d) the value				N/P	A
				·	d)		
(a) Line no:	(b) Amount involved	(c) Name of noncharitable e	xempt organization	Description of transfers, transact		iring arrange	ments
Late no.	Amount involved						
		·			<del></del>		
					<del></del>		
					<del></del>		
		<u> </u>	- <u></u>				
	<del>                                     </del>						
	<del>                                     </del>	<del></del>					_
			<del></del>	<del></del>			
	<del> </del>						
	<del>                                     </del>				<del>-</del>		
				<del>                                     </del>			
	<u> </u>			<u> </u>			
<b>52 a</b> 19	the organization directly or indir	rectly affiliated with, or related to	, one or more tax-exempt or	ganizations described in section 50	1(c) of the	_	
C	ode (other than section 501(c)(3	()) or in section 527?			▶ □	Yes 🛂	X No
	"Yes," complete the following sci						
	(a)		(b)		(c)		
	Name of organ	nization	Type of organization		of relationship		
			<del></del>				
				<del></del>			
					_		
					· · · · · ·		
			<del></del>				
				+			
		. —					
	<del></del>	<del></del>	<del>                                     </del>			_	_
			<del></del>	<del> </del>			
				<del> </del>			
				· · · · · · · · · · · · · · · · · · ·			

# Schedule B

(Form 990 or 990-EZ)

# **Schedule of Contributors**

Supplementary Information for line 1d of Form 990 or line 1 of Form 990-EZ (see instructions)

OMB No. 1545-0047

Department of the Treasury

Name of organization THE CENTER FOR THE RESPECT OF LIFE AND

**Employer identification number** 52-1520451

4947(a)(1) nonexempt charitable trust

Or	rganization type (check one)-Section: X 501(c)( 3 ) ◀ (enter number) 527 or 4947(a)(1) nonexempt char	ntable tru
A	Section 501(c)(7), (8), or (10) organizations-	
	Check this box if the organization had no charitable contributors who contributed more than \$1,000 during the year. (But see General	_
	rule below.)	

Note: This form is generally not open to public inspection except for section 527 organizations.

Enter here the total gifts received during the year for a religious, charitable, etc., purpose >\$

# General Instructions

### Purpose of Form

Schedule B (Form 990 or 990-EZ) is used by organizations required to file Form 990, Return of Organization Exempt From Income Tax, or Form 990-EZ, Short Form Return of Organization Exempt From Income tax, to provide the information regarding their contributors that is required for line 1d of Form 990 (or line 1 of Form 990-EZ)

Attach the Schedule B (Form 990 or 990-EZ) to Form 990 or 990-EZ. Attach Schedule B after Schedule A (Form 990 or 990-EZ), Organization Exempt Under Section 501(c)(3), if that return is required for the organization.

**ENVIRONMENT** 

## Who Must File Schedule B (Form 990 or 990-EZ)

All organizations must file Schedule B (Form 990 or 990-EZ) unless they certify that they do not meet the filing requirements of Schedule B (Form 990 or 9090-EZ) by checking the box in item L of the heading of their Form 990 or Form 990-EZ

See the instructions for item L in the Instructions for Form 990 and Form 990-EZ.

Caution: Schedule B (Form 990 or 990-EZ) is not a substitute for the list of "contributors" required for Part IV-A, Support Schedule, of Schedule A (Form 990 or 990-EZ).

## **Public Inspection**

Schedule B (Form 990 or 990-EZ) is:

- Open to public inspection for a section 527 political organization.
- Generally not open to public inspection for the other organizations that must file

If a non-section 527 organization files a copy of Form 990, or Form 990-EZ, and attachments with any state, it should not include its Schedule B (Form 990 or 990-EZ, in the attachments for the state unless a schedule of contributors is specifically required by the state. States that do not require the information might make the schedule available for public inspection along with the rest of the Form 990 or Form 990-EZ.

See the Instructions for Form 990 and Form 990-EZ for phone help and the public inspection rules for those forms and their attachments, which include Schedule B (Form 990 or 990-EZ).

## Contributors Required To Be Listed On Part I

"Contributor" includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations.

General rule. Unless the organization is covered by one of the special rules below, it must list on Part I every contributor who during the year, gave the organization directly or indirectly, money, securities, or any other type of property totaling \$5,000 or more for the year. Also complete Part II for a noncash contribution. In determining the \$5,000 amount, total all of the contributor's grits of \$1,000 or more for the year.

Section 501(c)(3) organizations. For an organization described in section 501(c)(3) that meets the 33 1/3% support test of the Regulations under sections 509(a)(1)/170(b)(1)(A)(vi) (whether or not the organization is otherwise described in section 170(b)(1)(A))-

List in Part I only those contributors whose contribution of \$5,000 or more is greater than 2% of the amount reported on line 1d of Form 990 (or line 1 of Form 990-EZ) (Regulations section 1.6033-2(a)(2)(III)(a))

Example. A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on line 1d of its Form 990. The organization is only required to list in Parts I and II of its Schedule B (Form 990 or 990-EZ) each person who contributed more than the

greater of \$5,000 or \$14,000 (2% of \$700,000). Thus, a contributor who gave a total of \$11,000 would not be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization exceeded \$5,000, it did not exceed \$14,000.

Section 501(c)(7), (8), or (10) organizations. For nonchantable contributions to one of these organizations, list in Part I contributors who gave \$5,000 or more as described in the General rule discussed above.

If a section 501(c)(7), (8), or (10) organization received contributions or bequests for use exclusively for religious, charitable, etc., purposes (sections 170(c)(4), 2055(a)(3), or 2522(a)(3))-

List in Part I each contributor whose contributions total more than \$1,000 during the year that were for a religious, charitable, etc., purpose. To determine the \$1,000, aggregate all of a contributor's gifts for the year (regardless of amount) For a noncash contribution, complete Part II

All section 501(c)(7), (8), or (10) organizations that received any charitable contributions and listed any charitable contributors on Part I must also complete Part III

It section 501(c)(7), (8), or (10) organization received charitable gifts, but is not required to list any charitable contributors on Part I, check the box on line A at the top of Schedule B (Form 990 or 990-EZ) and enter the amount of charitable contributions received in the space provided. The organization need not complete and attach Part III.

#### Specific Instructions

Note: You may duplicate Parts I, II, and III if more copies are needed. Number each page of each Part.

Part I. In column (a), identify the first contributor listed as no. 1 and the second contributor as no. 2, etc. Number consecutively. Show the contributor's name, address, aggregate contributions for the year; and the type of contribution (e.g., whether an individual, payroll, or noncash contribution). Report payroll contributions by listing the employer's name, address, and total amount given (unless an employee gave enough to be listed individually)

Part II. In column (a), show the number that corresponds to the contributor's number in Part I. Describe the noncash contribution fully. Report on property with readily determinable market value (i.e., market quotations for securities) by listing its fair market value (FMV). For marketable securities registered and listed on a recognized securities exchange, measure market value by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When market value cannot be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution that is subject to an outstanding debt, subtract the debt from the property's fair market value

Part III. Section 501(c)(7), (8), or (10) organizations that received contributions or bequests for use exclusively for religious, charitable, etc., purposes, must complete Parts I through III for those persons whose gifts totaled more than \$1,000 during the year. Show also, in the heading of Part III, total gifts that were \$1,000 or less and were for a religious, charitable, etc., purpose. Complete this information only on the first Part III page.

If an amount is set aside for a religious, charitable, etc., purpose, show in column (d) how the amount is held (e.g., whether it is mingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (a) and explain the relationship between the two organizations.

Name of organization

THE CENTER FOR THE RESPECT OF LIFE AND

52-1520451

Employer identification number

Part I	Contributors		
(a) No.	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
1		\$812,908.	Individual X Payroll  Noncash  (Complete Part II if a noncash contribution.)
(a) No.		(c) Aggregate contributions	(d) Type of contribution
2		\$ 115,000.	Individual X Payroll
(a) No.		(c) Aggregate contributions	(d) Type of contribution
3		\$ 145,000.	Individual X Payroll Noncash (Complete Part II if a noncash contribution.)
(a) No.	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
4		\$	Individual Payroll Noncash (Complete Part II if a noncash contribution.)
(a) No.	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
5		\$	Individual Payroll Noncash (Complete Part II if a noncash contribution.)
(a) No.	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
6	·	\$	Individual Payroll Noncash (Complete Part II if a noncash contribution.)

Form 990	Part V - Officer Compensation Related Organizations	from	Stat	Statement 4	
Officer's Name	Name of Related Organization	Compen- sation	Employee Ben Plar Contrib	ı Expen	
PAUL G. IRWIN	THE HUMANE SOCIETY OF THE UNITED STATES	269,370.	19,478.		0.
JAN HARTKE	THE HUMANE SOCIETY OF THE UNITED STATES	111,500.	8,908	•	0.
Form 990	Identification of Related Or Part VI, Line 80b		Stat	tement	5
Name of Organiza	tion		Exempt	NonExer	npt
THE NATIONAL ASS	OCIATION FOR HUMANE AND		X		
ENVIRONMENTAL ED	UCATION		X		
THE HUMANE SOCIETE EARTHKIND USA	TY OF THE UNITED STATES		X		
HUMANE SOCIETY I	NTERNATIONAL	<b>a</b>	X X		
THE HUMANE SOCIE	TY OF THE UNITED STATES WILDLIF	Ŀ	Λ		
MEADOWCREEK, INC			X		
WORLDWIDE NETWOR EARTHVOICE INTER			X X		
Schedule A	Identification of Excess Con Included on Part IV, Lin		Sta	tement	<del></del> 6
· · · · · · · · · · · · · · · · · · ·	*** Not Open to Public Insp	pection ***			
Contributor's Na	me	Tota Contrib		Excess ntribut:	ion
	<del></del>	135	,000.	85,19	94.
		100	,000.	50,19	94.
			,000. ,000.	245,19 155,19	
Total Excess Con	tributions to Schedule A, Line 3	26b		535,7	76.

Form 990		Other Expenses				_1
		(A)	(B) Program	(C) Management	(D)	
Description	_	Total	Services	and General	Fundraisin	
CONSULTANTS INDIRECT COST		155,011.	155,011.			
ALLOCATION		425,056.		124,791.	. 300,265	
EDUCATIONAL PUBLICATIONS MAILING COSTS		162,046. 496.	162,046. 496.			
ADMINISTRATIVE EXPENSES		217,175.	217,175.			
Total to Fm 990	, ln 43	959,784.	534,728.	124,791.	300,2	65.
Form 990  Classification	; Donee's	Cash Grants an	nd Allocations	Donee's Relationsh	Statement	
	WASHING	SHINGTON AND LEE			1,8	
	EARTH SPIRIT RISING			None	500.	
	FOUNDAT SURVIVA HUMANIT	L OF		None	5,0	00.
	TRIBAL FOUNDAT			None	3	00
Total Included	on Form	990, Part II, 1	line 22		7,6	00.

Form 990 Part V - List Trustees	of Officers, Dire and Key Employees	ctors,	State	ement 3
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense Account
RICHARD M. CLUGSTON 10222 LESLIE STREET SILVER SPRING, MD 20902	EXECUTIVE DIRE	CTOR 0.	0.	0.
PAUL G. IRWIN 14004 CROSSLAND LANE DARNESTOWN, MD 20878	PRESIDENT PART TIME	0.	0.	0.
JAN HARTKE 11280 SPYGLASS COVE LANE RESTON, VA	DIRECTOR PART TIME	0.	0.	0.
MARY EVELYN TUCKER 2100 L STREET, NW WASHINGTON, DC 20037	CHAIRMAN PART TIME	0.	0.	0.
DONALD W. CASHEN 2100 L STREET, NW WASHINGTON, DC 20037	SECRETARY-TREA	ASURER 0.	0.	0.
JOHN A. HOYT 2100 L STREET, NW WASHINGTON, DC 20037	PRESIDENT EMEI	RITUS 0.	0.	0.
THOMAS BERRY 2100 L STREET, NW WASHINGTON, DC 20037	DIRECTOR PART TIME	0.	0.	0.
ANITA W. COUPE 2100 L STREET, NW WASHINGTON, DC 20037	DIRECTOR PART TIME	0.	0.	0.
GWENDOLYN EVANS JENSEN 2100 L STREET, NW WASHINGTON, DC 20037	DIRECTOR PART TIME	0.	0.	0.
MICHAEL W. FOX 2100 L STREET, NW WASHINGTON, DC 20037	DIRECTOR PART TIME	0.	0.	0.
JOHN GRIM 2100 L STREET, NW WASHINGTON, DC 20037	DIRECTOR PART TIME	0 .	. 0.	0 .

THE CENTER FOR THE RESPECT OF L	IFE AND E		52-15	520451
STEPHANIE KAZA 2100 L STREET, NW WASHINGTON, DC 20037	DIRECTOR PART TIME	0.	0.	0.
FRED KIRSHENMANN 2100 L STREET, NW WASHINGTON, DC 20037	DIRECTOR PART TIME	0.	0.	0.
ELIZABETH LAWRENCE 2100 L STREET, NW WASHINGTON, DC 20037	DIRECTOR PART TIME	0.	0.	0.
RANDALL LOCKWOOD 2100 L STREET, NW WASHINGTON, DC 20037	DIRECTOR PART TIME	0.	0.	0.
JACK W. LYDMAN 2100 L STREET, NW WASHINGTON, DC 20037	DIRECTOR PART TIME	0.	0.	0.
JAY McDANIEL 2100 L STREET, NW WASHINGTON, DC 20037	DIRECTOR PART TIME	0.	0.	0.
DAVID ORR 2100 L STREET, NW WASHINGTON, DC 20037	DIRECTOR PART TIME	0.	0.	0.
LEWIS REGENSTEIN 2100 L STREET, NW WASHINGTON, DC 20037	DIRECTOR PART TIME	0.	0.	0.
GARY VALEN 2100 L STREET, NW WASHINGTON, DC 20037	DIRECTOR PART TIME	0.	0.	0.
DIETER HESSEL 2100 L STREET, NW WASHINGTON, DC 20037	DIRECTOR PART TIME	0.	0.	0.
Totals Included on Form 990, Part	- - V	0.	0.	0.

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