

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2003 calendar year, or tax year beginning, 2003, and ending

B Check if applicable:

- Address change
Name change
Initial return
Final return
Amended return
Application pending

Please use IRS label or print or type. See specific instructions.

C Name of organization

CENTER FOR DEMOCRACY AND TECHNOLOGY

Number and street (or P.O. box if mail is not delivered to street addr) Room/suite

1634 I STREET, NW 1100

City, town or country State ZIP code + 4

WASHINGTON DC 20006-4003

D Employer Identification Number

52-1905358

E Telephone number

(202) 637-9800

F Accounting method:

- Cash
[X] Accrual
Other (specify)

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

H and I are not applicable to section 527 organizations.

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

H (b) If 'Yes,' enter number of affiliates.

H (c) Are all affiliates included? Yes No

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

G Web site: www.cdt.org

J Organization type

(check only) 501(c) 3 4947(a)(1) or 527

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

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12. 1,639,620.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions)

Table with columns for Revenue, Expenses, and Assets. Rows include: 1 Contributions, gifts, grants, and similar amounts received; 2 Program service revenue including government fees and contracts; 3 Membership dues and assessments; 4 Interest on savings and temporary cash investments; 5 Dividends and interest from securities; 6a Gross rents; 6b Less: rental expenses; 6c Net rental income or (loss); 7 Other investment income; 8a Gross amount from sales of assets other than inventory; 8b Less: cost or other basis and sales expenses; 8c Gain or (loss); 8d Net gain or (loss); 9 Special events and activities; 9a Gross revenue; 9b Less: direct expenses; 9c Net income or (loss); 10a Gross sales of inventory; 10b Less: cost of goods sold; 10c Gross profit or (loss); 11 Other revenue; 12 Total revenue; 13 Program services; 14 Management and general; 15 Fundraising; 16 Payments to affiliates; 17 Total expenses; 18 Excess or (deficit) for the year; 19 Net assets or fund balances at beginning of year; 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year.

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

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 (att sch) (cash \$ _____ non-cash \$ _____)	22			
23	Specific assistance to individuals (att sch)	23			
24	Benefits paid to or for members (att sch)	24			
25	Compensation of officers, directors, etc	25	459,069.	358,985.	30,236.
26	Other salaries and wages	26	516,954.	487,586.	19,482.
27	Pension plan contributions	27	52,252.	44,581.	2,924.
28	Other employee benefits	28	75,756.	61,595.	8,256.
29	Payroll taxes	29	63,318.	56,317.	3,116.
30	Professional fundraising fees	30			
31	Accounting fees	31	52,966.	0.	52,966.
32	Legal fees	32	232.	0.	118.
33	Supplies	33	23,743.	14,216.	8,341.
34	Telephone	34	21,686.	19,394.	971.
35	Postage and shipping	35	6,684.	4,252.	2,088.
36	Occupancy	36	109,486.	94,661.	5,989.
37	Equipment rental and maintenance	37			
38	Printing and publications	38	12,570.	11,959.	611.
39	Travel	39	57,840.	49,800.	7,857.
40	Conferences, conventions, and meetings	40	5,431.	0.	5,431.
41	Interest	41			
42	Depreciation, depletion, etc (attach schedule)	42	22,845.	19,749.	1,252.
43	Other expenses not covered above (itemize):				
a	INSURANCE	43a	1,859.	1,640.	99.
b	CONSULTANTS	43b	132,256.	120,256.	0.
c	TEMPORARIES	43c	8,335.	3,034.	5,059.
d	DUES AND SUBSCRIPTIONS	43d	27,084.	24,037.	1,552.
e	See Other Expenses Stmt	43e	38,879.	31,740.	4,259.
44	Total functional expenses (add lines 22 - 43). Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	1,689,245.	1,403,802.	160,607.

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

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? <input type="checkbox"/> EDUCATIONAL AND CHARITABLE	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)
a <u>FREE SPEECH: RESEARCH, PUBLIC EDUCATION & LITIGATION ON CONSTITUTIONAL AND TECHNICAL ASPECTS OF FREE SPEECH ONLINE, INCLUDING FIRST AMENDMENT LAWSUIT IN PENNSYLVANIA & EXPANSION OF GETNETWISE RESOURCE FOR FAMILIES</u> (Grants and allocations \$ 0.)	185,837.
b <u>COPYRIGHT: RESEARCH & PUBLIC EDUCATION ON CONSUMER INTERESTS IN DIGITAL RIGHTS MANAGEMENT TECHNOLOGY, INCLUDING PUBLICATION OF REPORT ON DIGITAL TV COPYRIGHT PROTECTION</u> (Grants and allocations \$ 0.)	273,975.
c <u>DATA PRIVACY: RESEARCH & DIALOGUE WITH INDUSTRY ON DEVELOPMENT OF POLICY AND TECHNICAL FRAMEWORK FOR DATA PROTECTION ONLINE; PUBLICATION OF CONSUMER EDUCATION REPORTS ON SPYWARE & SPAM, AUTHENTICATION PRIVACY PRINCIPLES & COMPENDIUM OF PAPERS ON PRIVACY</u> (Grants and allocations \$ 0.)	216,636.
d <u>4TH AMENDMENT PRIVACY: RESEARCH & COMMENTARY ON PRIVACY ISSUES POSED BY RESPONSES TO TERRORISM, INCLUDING COMMENTS ON AIRLINE PASSENGER SCREENING SYSTEM, CONGRESSIONAL TESTIMONY ON CIVIL LIBERTIES & PUBLICATION OF PAPER ON INTELLIGENCE OVERSIGHT</u> (Grants and allocations \$ 0.)	296,915.
e Other program services. . SEE. SCHEDULE (Grants and allocations \$ 0.)	430,439.
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	1,403,802.

Part IV Balance Sheets (See Instructions)

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

		(A) Beginning of year		(B) End of year
ASSETS	45 Cash — non-interest-bearing	224,515.	45	279,763.
	46 Savings and temporary cash investments	190,714.	46	82,515.
	47 a Accounts receivable	47 a 195,578.		
	b Less: allowance for doubtful accounts	47 b	47 c	195,578.
	48 a Pledges receivable	48 a		
	b Less: allowance for doubtful accounts	48 b	48 c	
	49 Grants receivable	112,500.	49	91,250.
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51 a Other notes & loans receivable (attach sch)	51 a		
	b Less: allowance for doubtful accounts	51 b	51 c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	85.	53	28,329.
	54 Investments — securities (attach schedule)	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV	54	
	55 a Investments — land, buildings, & equipment: basis	55 a		
	b Less: accumulated depreciation (attach schedule)	55 b	55 c	
56 Investments — other (attach schedule)		56		
57 a Land, buildings, and equipment: basis	57 a 118,706.			
b Less: accumulated depreciation (attach schedule)	57 b 89,878.	57 c	28,828.	
58 Other assets (describe ▶ See Line 58 Stmt)	11,259.	58	4,700.	
59 Total assets (add lines 45 through 58) (must equal line 74)	734,060.	59	710,963.	
LIABILITIES	60 Accounts payable and accrued expenses	15,580.	60	41,045.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64 a Tax-exempt bond liabilities (attach schedule)		64 a	
	b Mortgages and other notes payable (attach schedule)		64 b	
	65 Other liabilities (describe ▶ See Line 65 Stmt)	34,955.	65	36,018.
66 Total liabilities (add lines 60 through 65)	50,535.	66	77,063.	
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	608,525.	67	633,900.
	68 Temporarily restricted	75,000.	68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	683,525.	73	633,900.	
74 Total liabilities and net assets/fund balances (add lines 66 and 73)	734,060.	74	710,963.	

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

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions.)

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total revenue, gains, and other support per audited financial statements ▶	a	1,639,620.
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments . . . \$ _____		
(2)	Donated services and use of facilities . . . \$ _____		
(3)	Recoveries of prior year grants \$ _____		
(4)	Other (specify): _____ _____ \$ _____		
	Add amounts on lines (1) through (4) . . . ▶	b	
c	Line a minus line b ▶	c	1,639,620.
d	Amounts included on line 12, Form 990 but not on line a :		
(1)	Investment expenses not included on line 6b, Form 990 . . . \$ _____		
(2)	Other (specify): _____ _____ \$ _____		
	Add amounts on lines (1) and (2) . . ▶	d	
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	1,639,620.

a	Total expenses and losses per audited financial statements ▶	a	1,689,245.
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities \$ _____		
(2)	Prior year adjustments reported on line 20, Form 990 . . \$ _____		
(3)	Losses reported on line 20, Form 990 . . \$ _____		
(4)	Other (specify): _____ _____ \$ _____		
	Add amounts on lines (1) through (4) . . . ▶	b	
c	Line a minus line b ▶	c	1,689,245.
d	Amounts included on line 17, Form 990 but not on line a :		
(1)	Investment expenses not included on line 6b, Form 990 . . . \$ _____		
(2)	Other (specify): _____ _____ \$ _____		
	Add amounts on lines (1) and (2) . . ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	1,689,245.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
JERRY BERMAN 1634 EYE ST WASHINGTON, DC 20006	PRESIDENT 40			0.
TONI CARBO 135 N BELLEFIELD AVE PITTSBURG, PA 15260	DIRECTOR 1	0.	0.	0.
CAROL FUKUNAGA 415 S BERETANIA HONOLULU, HI 96813	DIRECTOR 1	0.	0.	0.
TRACY WESTEN 10951 W PICO BLVD LOS ANGELES, CA 90064	DIRECTOR 1	0.	0.	0.
DANIEL WEITZNER 545 TECHNOLOGY SQ CAMBRIDGE, MA 02139	DIRECTOR 1	0.	0.	0.
See List of Officers, Etc. Statement				0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ▶ Yes No
If 'Yes,' attach schedule — see instructions.

Part VI Other Information (See instructions.)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78 a	X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	78 b	X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc. to any other exempt or nonexempt organization?	80 a	X
b	If 'Yes,' enter the name of the organization ▶ <u>INTERNET EDUCATION FOUNDATION</u> and check whether it is <input checked="" type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a	Enter direct and indirect political expenditures. See line 81 instructions	81 a	0.
b	Did the organization file Form 1120-POL for this year?	81 b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82 a	X
b	If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82 b	
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83 a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83 b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84 a	X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84 b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85 a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85 b	
c	Dues, assessments, and similar amounts from members	85 c	
d	Section 162(e) lobbying and political expenditures	85 d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85 e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85 f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85 g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85 h	
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86 a	
b	Gross receipts, included on line 12, for public use of club facilities	86 b	
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87 a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87 b	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX	88	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0. ; section 4912 ▶ 0. ; section 4955 ▶ 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction	89 b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0.		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶		
90 a	List the states with which a copy of this return is filed ▶ <u>DISTRICT OF COLUMBIA</u>		
b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions.)	90 b	9
91	The books are in care of ▶ <u>CENTER FOR DEMOCRACY & TECHNOLOGY</u> Telephone number ▶ <u>(202) 637-9800</u> Located at ▶ <u>I EYE ST NW, SUITE 1100 DC</u> ZIP + 4 ▶ <u>20006-4003</u>		
92	Section 4947(a)(1) nonexempt charitable trusts filling Form 990 in lieu of Form 1041 – Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92		

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

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a ADMINISTRATIVE SUPPORT					85,043.
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts.			14	1,909.	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b MISC INCOME					117.
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				1,909.	85,160.
105 Total (add line 104, columns (B), (D), and (E))					87,069.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93a	CONTRACTS ARE REALTED TO EXEMPT PURPOSE SUBJECTS
103a	INSURANCE REFUND FOR STOLEN PROPERTY

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See instructions.) N/A

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See instructions.)

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

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

Please Sign Here

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

Signature of officer _____ Date _____

Type or print name and title _____

Paid Preparer's Use Only

Preparer's signature _____ Date 08/08/04

Firm's name (or yours if self-employed) **McGuire Associates**

address, and ZIP + 4 **6155 Fuller Court, #2 Alexandria VA 223102541**

Check if self-employed Preparer's SSN or PTIN (see General Instruction W) _____

EIN _____ Phone no. **(703) 924-6270**

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 — (See separate instructions.)

2003

Department of the Treasury
Internal Revenue Service

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

Name of the organization CENTER FOR DEMOCRACY AND TECHNOLOGY	Employer identification number 52-1905358
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See instructions. List each one. If there are none, enter 'None.')

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
ARI SCHWARTZ ----- 1634 EYE ST NW, WASH, DC 20006	ASSOC DIRECTOR 40			0.
JOHN B MORRIS, JR. ----- 1634 EYE ST, NW, WASH DC 20006	DIR, INTERNET STANDARDS, TECHNOLOGY AND POLICY 40	.		0.
PAULA BRUENING ----- 1634 EYE ST NW, WASH, DC 20006	STAFF COUNSEL 40			0.
LARA M FLINT ----- 1634 EYE ST NW, WASH, DC 20006	STAFF COUNSEL 40	.	.	0.
----- -----				
Total number of other employees paid over \$50,000 ▶	4			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See instructions. List each one (whether individuals or firms). If there are none, enter 'None.')

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

Part III Statements About Activities (See instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>32,271.</u> <u>32,271.</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1	X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking 'Yes,' must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?	2 a	X
b Lending of money or other extension of credit?	2 b	X
c Furnishing of goods, services, or facilities?	2 c	X
See Part V, Form 990		
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2 d	X
e Transfer of any part of its income or assets?	2 e	X
3 a Do you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an explanation of how you determine that recipients qualify to receive payments.)	3 a	X
b Do you have a section 403(b) annuity plan for your employees?	3 b	X
4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4	X

Part IV Reason for Non-Private Foundation Status (See instructions.)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

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

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

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

- 14** An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)

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

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

Calendar year (or fiscal year beginning in) ▶	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,827,555.	1,569,176.	1,476,441.	1,135,664.	6,008,836.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	1,715.	5,029.	5,394.	6,057.	18,195.
19 Net income from unrelated business activities not included in line 18.					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets. See L-22 Stmt.	1,632.	4,738.		50,000.	56,370.
23 Total of lines 15 through 22.	1,830,902.	1,578,943.	1,481,835.	1,191,721.	6,083,401.
24 Line 23 minus line 17.	1,830,902.	1,578,943.	1,481,835.	1,191,721.	6,083,401.
25 Enter 1% of line 23.	18,309.	15,789.	14,818.	11,917.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶					26 a 121,668.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts. ▶					26 b 3,131,511.
c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶					26 c 6,083,401.
d Add: Amounts from column (e) for lines: 18 18,195. 19 56,370. 22 56,370. 26 b 3,131,511. ▶					26 d 3,206,076.
e Public support (line 26c minus line 26d total) ▶					26 e 2,877,325.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)). ▶					26 f 47.30 %
27 Organizations described on line 12:					
a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year: (2002) _____ (2001) _____ (2000) _____ (1999) _____					
b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2002) _____ (2001) _____ (2000) _____ (1999) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ . . . ▶					27 c _____
d Add: Line 27a total . . . and line 27b total ▶					27 d _____
e Public support (line 27c total minus line 27d total). ▶					27 e _____
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶					27 f _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶					27 g _____ %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). ▶					27 h _____ %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

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

N/A

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.) ----- ----- -----		
32	Does the organization maintain the following:		
	a Records indicating the racial composition of the student body, faculty, and administrative staff?		
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
	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.) ----- -----		
33	Does the organization discriminate by race in any way with respect to:		
	a Students' rights or privileges?		
	b Admissions policies?		
	c Employment of faculty or administrative staff?		
	d Scholarships or other financial assistance?		
	e Educational policies?		
	f Use of facilities?		
	g Athletic programs?		
	h Other extracurricular activities? If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
34 a	Does the organization receive any financial aid or assistance from a governmental agency?		
	b Has the organization's right to such aid ever been revoked or suspended? If you answered 'Yes' to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation.		

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions.) (To be completed ONLY by an eligible organization that filed Form 5768)

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

Limits on Lobbying Expenditures

(The term 'expenditures' means amounts paid or incurred.)

Table with 3 columns: Line number, Description, (a) Affiliated group totals, (b) To be completed for ALL electing organizations. Rows 36-44 include lobbying expenditures, exempt purpose expenditures, and nontaxable amounts.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50.)

Table with 6 columns: Calendar year (or fiscal year beginning in), (a) 2003, (b) 2002, (c) 2001, (d) 2000, (e) Total. Rows 45-50 show lobbying nontaxable amount, ceiling amount, total lobbying expenditures, grassroots nontaxable amount, grassroots ceiling amount, and grassroots lobbying expenditures.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a Volunteers
b Paid staff or management (Include compensation in expenses reported on lines c through h.)
c Media advertisements
d Mailings to members, legislators, or the public
e Publications, or published or broadcast statements
f Grants to other organizations for lobbying purposes.
g Direct contact with legislators, their staffs, government officials, or a legislative body
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
i Total lobbying expenditures (add lines c through h.)

Table with 3 columns: Yes, No, Amount. Rows correspond to items a-i.

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

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

Table with 3 columns: Description, Yes, No. Rows include (i) Cash, (ii) Other assets, and sub-section b with items (i) through (vi) regarding other transactions, and c regarding sharing of facilities.

d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

Large table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If 'Yes,' complete the following schedule:

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary information for
line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No. 1545-0047

2003

Name of organization

CENTER FOR DEMOCRACY AND TECHNOLOGY

Employer identification number

52-1905358

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

- 501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (**Note:** Only a section 501(c)(7), (8), or (10) organization can check box(es) for both the General Rule and a Special Rule – see instructions.)

General Rule –

- For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

Special Rules –

- For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)
- For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.)
- For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year.) ▶ \$ _____

Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Paperwork Reduction Act Notice, see the instructions for Form 990 and Form 990-EZ.

Schedule B (Form 990, 990-EZ, or 990-PF) (2003)

Name of organization

Employer identification number

CENTER FOR DEMOCRACY AND TECHNOLOGY

52-1905358

Part I Contributors (See Specific Instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	AMERICA ONLINE 8619 WESTWOOD CENTER DRIVE VIENNA VA 22182	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	ACXIOM CORPORATION 1 INFORMATION WAY LITTLE ROCK AR 72202	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	AMERICAN EXPRESS 20002 N 19TH AVENUE PHOENIX AZ 85027	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	CHOICE POINT 1000 ALDERMAN DRIVE ALPHARETTA GA 30005	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	EBAY INC 2145 HAMILTON AVENUE SAN JOSE CA 95125	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	INTERNEWS PO BOX 4448 ARCATA CA 95518	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

CENTER FOR DEMOCRACY AND TECHNOLOGY

52-1905358

Part I Contributors (See Specific Instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	AT&T ----- 295 N MAPLE AVE ----- BASKING RIDGE NJ 07920 -----	\$ -----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	MARKLE FOUNDATION ----- 10 ROCKEFELLER PLAZA, 16TH FLOOR ----- NEW YORK NY 10020 -----	\$ -----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9	BUSINESS SOFTWARE ALLIANCE ----- 2001 L STREET NW ----- WASHINGTON DC 20036 -----	\$ -----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10	DOUBLE CLICK ----- 450 WEST 33RD STREET ----- NEW YORK NY 10001 -----	\$ -----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11	MICROSOFT ----- ONE MICROSOFT WAY ----- REDMOND VA 96052-0390 -----	\$ -----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12	ERNST & YOUNG LLP ----- 8381 OLD COURTHOUSE RD, STE 200 ----- VIENNA VA 22182 -----	\$ -----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

CENTER FOR DEMOCRACY AND TECHNOLOGY

52-1905358

Part I Contributors (See Specific Instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	OPEN SOCIETY INSTITUTE 400 W 59TH STREET NEW YORK NY 10019	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
14	PITNEY BOWES 409 12TH NW, STE 701 WASHINGTON DC 20024	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
15	UNITED NATIONS ONE UN PLAZA DC2-1714 NEW YORK NY 10017	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
16	THE FORD FOUNDATION 320 E 43RD STREET NEW YORK NY 10017	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
17	FIDELITY CORPORATE SERVICES 82 DEVONSHIRE STREET BOSTON MA 02109-3614	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
18	THE SANS INSTITUTE 8120 WOODMONT AVE, STE 205 BETHESDA MD 20814	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

CENTER FOR DEMOCRACY AND TECHNOLOGY

52-1905358

Part I Contributors (See Specific Instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19	VERISIGN ----- 21355 RIDGETOP CIRCLE ----- DULLES VA 20166 -----	\$-----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
20	VERIZON COMMUNICATIONS ----- 13100 COLUMBIA PIKE ----- SILVER SPRING MD 20904 -----	\$-----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
21	FREEDOM TO READ FOUNDATION ----- 50 EAST HURON STREET ----- CHICAGO IL 60611 -----	\$-----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
22	VISA USA INC ----- PO BOX 8999 ----- SAN FRANCISCO VA 94128 -----	\$-----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
23	WORLD BANK GROUP ----- 1818 H ST NW, STE G2-018 ----- WASHINGTON DC 20433 -----	\$-----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
24	YAHOO ----- 701 FIRST AVE ----- SUNNYVILLE CA 94089-0703 -----	\$-----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

CENTER FOR DEMOCRACY AND TECHNOLOGY

52-1905358

Part I Contributors (See Specific Instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
25	HEWLETT PACKARD FINANCIAL SVC CENTER, PO BOX 2810 COLORADO CO 80901-2810	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
26	INTEL CORPORATION PO BOX 1000 HILLSBORO OR 97123-1000	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
27	INTERACTIVE DIGITAL SOFTWARE ASSN 1211 CONNECTICUT AVE, NW, STE 600 WASHINGTON DC 20036-2705	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
28	INTERNET EDUCATION FOUNDATION 1634 EYE STREET NW, 11TH FLOOR WASHINGTON DC 20006	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
29	LEXIS NEXIS PO BOX 7247-7090 PHILADELPHIA PA 19170	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
30	SYSTEMS RESERACH & DEVELOPMENT PO BOX 19576 LAS VEGAS NV 89132	\$.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization CENTER FOR DEMOCRACY AND TECHNOLOGY	Employer identification number 52-1905358
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Part I Contributors (See Specific Instructions.)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
31	JOHN & CATHERINE T MACARTHUR FOUNDATION ----- 140 S DEARBORN STREET ----- CHICAGO IL 60603 -----	\$ -----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
32	SADOWSKY ASSOCIATES LLC ----- 64 SWEET BRIAR ROAD ----- STAMFORD CT 06905 -----	\$ -----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
33	SNAPNAMES.COM INC ----- 115 NW FIRST AVENUE ----- PORTLAND OR 97209 -----	\$ -----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
34	SPSS, INC ----- 233 S WACHER DRIVE, 11TH FLOOR ----- CHICAGO IL 60606 -----	\$ -----	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-----	----- ----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
-----	----- ----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Depreciation and Amortization (Including Information on Listed Property)

See separate instructions. Attach to your tax return.

2003

67

Name(s) shown on return

CENTER FOR DEMOCRACY AND TECHNOLOGY

Identifying number

52-1905358

Business or activity to which this form relates

Form 990 / Form 990EZ

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

Table with 5 main rows for election details and 13 rows for property listing with columns for description, cost, and elected cost.

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

Table with 3 rows for special depreciation allowance and other depreciation.

Part III MACRS Depreciation (Do not include listed property.) (See instructions)

Section A

Table with 2 rows for MACRS deductions and election to group assets.

Section B - Assets Placed in Service During 2003 Tax Year Using the General Depreciation System

Table with 7 columns: Classification, Month/year placed, Basis, Recovery period, Convention, Method, Depreciation deduction. Includes rows for 3-year, 5-year, 7-year, 10-year, 15-year, 20-year, 25-year, residential rental, and nonresidential real property.

Section C - Assets Placed in Service During 2003 Tax Year Using the Alternative Depreciation System

Table with 6 columns: Class life, Month/year placed, Basis, Recovery period, Convention, Method, Depreciation deduction. Includes rows for 12-year and 40-year assets.

Part IV Summary (see instructions)

Table with 3 rows for summary totals: Listed property, Total depreciation, and Basis for current year.

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See instructions for limits for passenger automobiles.)

Table with 9 main columns (a-i) and rows 24a through 29. Row 24a asks for evidence of business use. Rows 25-27 ask about depreciation allowances. Row 28 asks for totals in column (h). Row 29 asks for totals in column (i).

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table with 6 main columns (a-f) and rows 30 through 36. Rows 30-33 track miles driven for different purposes. Rows 34-36 ask about personal use and availability.

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

Table with 2 main columns (Yes/No) and rows 37 through 41. Rows 37-41 ask about written policies, information retention, and demonstration use.

Part VI Amortization

Table with 6 main columns (a-f) and rows 42 through 44. Row 42 asks for amortization starting in 2003. Row 43 asks for amortization starting before 2003. Row 44 is the total for column (f).

Form 990, Page 2, Part II, Line 43

Other Expenses Stmt

Other expenses not covered above (itemize):	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
NETWORK USAGE	19,270.	16,716.	1,032.	1,522.
COMPUTER SUPPLIES	3,493.	3,083.	166.	244.
OFFICE EQUIP EXPENSE	14,204.	10,288.	2,956.	960.
LOSS ON DISPOSAL OF ASSETS	1,912.	1,653.	105.	154.
Total	<u>38,879.</u>	<u>31,740.</u>	<u>4,259.</u>	<u>2,880.</u>

Form 990, Page 3, Part IV, Lines 57a & 57b

Land, Buildings and Equipment Statement

	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
COMPUTERS/EQUIPMENT/FURNITURE	118,706.	89,878.	28,828.
Total	<u>118,706.</u>	<u>89,878.</u>	<u>28,828.</u>

Form 990, Page 3, Part IV, Line 58

Other Assets Statement

Line 58 - Other Assets:	Beginning of Year	End of Year
DEPOSITS	11,259.	4,700.
Total	<u>11,259.</u>	<u>4,700.</u>

Form 990, Page 3, Part IV, Line 65

Other Liabilities Statement

Line 65 - Other Liabilities:	Beginning of Year	End of Year
PAYROLL TAXES PAYABLE	1,941.	7,355.
SALARIES PAYABLE	24,921.	28,663.
PENSION PAYABLE	8,093.	0.
Total	<u>34,955.</u>	<u>36,018.</u>

Form 990, Page 4, Part V

List of Officers, Etc. Statement

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
JUDITH KRUG 50 EAST HURON STREET CHICAGO, IL 60611	CHAIR 1	0.	0.	0.
MARK LLOYD 818 18TH STREET NW WASHINGTON, DC 20006	DIRECTOR 1	0.	0.	0.
JAMES DEMPSEY 1634 EYE ST NW WASHINGTON, DC 20006	SECTY/EXEC DIR 1/SECTY 40/DEP DIR			0.
ALAN DAVIDSON 1634 EYE ST NW WASHINGTON, DC 20006	TREAS/ASSOC DIR 1/TREAS 40/ASSOC DIR		.	0.

Total

===== ===== =====
0.

Schedule A, Part IV-A, Line 22

Other Income

Description	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
REIMBURSED TRAVEL EXPENSES		4,738.			4,738.
PUBLICATION INCOME	715.				715.
ADMINISTRATIVE SUPPORT				50,000.	50,000.
EMPLOYEE COMPUTER PURCHASE	917.				917.
Total	<u>1,632.</u>	<u>4,738.</u>		<u>50,000.</u>	<u>56,370.</u>

Supporting Statement of:

Form 990 p 1/Line 1a

Description	Amount
CONTRIBUTIONS-OTHER	851,117.
GRANTS	700,350.
INDIVIDUAL CONTRIBUTIONS	1,084.
Total	<u>1,552,551.</u>

Supporting Statement of:

Form 990 p 2/Other Program Service Exp

Description	Amount
GLOBAL INTERNET POLICY INITIATIVE	160,950.
STANDARDS	102,494.
DNS PROJECT (DOMAIN NAME)	40,244.
E-DEMOCRACY	58,181.
E-GOVERNANCE WORLD BANK	3,635.
INTERNET EDUCATION FOUNDATION	64,935.
Total	<u>430,439.</u>

Supporting Statement of:

Sch. A, 990 p 3/Line 22-b

Description	Amount
VOIDED EXPENSES PRIOR YEAR	4,738.
Total	<u>4,738.</u>

Supporting Statement of:

Sch. A, 990 p 3/Line 22-d

Description	Amount
CONTRACT INCOME	50,000.
Total	<u>50,000.</u>