

Return of Organization Exempt From Income Tax

2002

Department of the Treasury
Internal Revenue Service

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

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

A For the 2002 calendar year, or tax year period beginning and ending

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization
NATIONAL CENTER FOR MISSING AND EXPLOITED CHILDREN
 Number and street (or P O box if mail is not delivered to street address) Room/suite
699 PRINCE STREET
 City or town, state or country, and ZIP + 4
ALEXANDRIA, VA 22314

D Employer identification number
52-1328557

E Telephone number
(703) 274-3900

F Accounting method: Cash 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? **N/A** Yes No (If "No," attach a list)

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

I Enter 4-digit GEN _____

G Web site **HTTP://WWW.MISSINGKIDS.COM**

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

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

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

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 **34,812,682.**

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

| | | | | | | |
|------------|--|--|----------------|-------------|-------------|--|
| Revenue | 1 | Contributions, gifts, grants, and similar amounts received | | | | |
| | a | Direct public support | 1a | 6,552,936. | | |
| | b | Indirect public support | 1b | 255,029. | | |
| | c | Government contributions (grants) | 1c | 25,838,215. | | |
| | d | Total (add lines 1a through 1c) (cash \$ 32,386,780. noncash \$ 259,400.) | 1d | | 32,646,180. | |
| | 2 | Program service revenue including government fees and contracts (from Part III, line 2) | 2 | | 138,802. | |
| | 3 | Membership dues and assessments | 3 | | | |
| | 4 | Interest on savings and temporary cash investments | 4 | | 45,612. | |
| | 5 | Dividends and interest from securities | 5 | | | |
| | 6a | Gross rents | 6a | 84,572. | | |
| | b | Less rental expenses, etc. | 6b | 188,821. | | |
| | c | Net rental income or (loss) (subtract line 6b from line 6a) | 6c | | <104,249.> | |
| 7 | Other investment income (describe _____) | 7 | | | | |
| Revenue | 8a | Gross amount from sale of assets other than inventory | (A) Securities | | (B) Other | |
| | | | 552,700. | 8a | | |
| | b | Less cost or other basis and sales expenses | 583,039. | 8b | | |
| | c | Gain or (loss) (attach schedule) | <30,339.> | 8c | | |
| d | Net gain or (loss) (combine line 8c, columns (A) and (B)) | STMT 3 | | 8d | <30,339.> | |
| Revenue | 9 | Special events and activities (attach schedule) | | | | |
| | a | Gross revenue (not including \$ 479,117. of contributions reported on line 1a) | 9a | 1,344,816. | | |
| | b | Less direct expenses other than fundraising expenses | 9b | 644,310. | | |
| c | Net income or (loss) from special events (subtract line 9b from line 9a) | 9c | | 700,506. | | |
| Revenue | 10a | Gross sales of inventory, less returns and allowances | 10a | | | |
| | b | Less cost of goods sold | 10b | | | |
| | c | Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) | 10c | | | |
| 11 | Other revenue (from Part VII, line 103) | 11 | | | | |
| 12 | Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) | 12 | | 33,396,512. | | |
| Expenses | 13 | Program services (from line 44, column (B)) | 13 | | 28,447,345. | |
| | 14 | Management and general (from line 44, column (C)) | 14 | | 466,114. | |
| | 15 | Fundraising (from line 44, column (D)) | 15 | | 880,448. | |
| | 16 | Payments to affiliates (attach schedule) | 16 | | | |
| | 17 | Total expenses (add lines 16 and 44, column (A)) | 17 | | 29,793,907. | |
| 18 | Excess or (deficit) for the year (subtract line 17 from line 12) | 18 | | 3,602,605. | | |
| Net Assets | 19 | Net assets or fund balances at beginning of year (from line 73, column (A)) | 19 | | 9,055,975. | |
| | 20 | Other changes in net assets or fund balances (attach explanation) | 20 | | <273,485.> | |
| | 21 | Net assets or fund balances at end of year (combine lines 18, 19, and 20) | 21 | | 12,385,095. | |

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SCANNED JUN 24 2003

NATIONAL CENTER FOR MISSING AND EXPLOITED CHILDREN

52-1328557

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

| Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I | | (A) Total | (B) Program services | (C) Management and general | (D) Fundraising |
|--|---|-------------|----------------------|----------------------------|-----------------|
| 22 | Grants and allocations (attach schedule) cash \$211,812 noncash \$ | 211,812. | 211,812. | STATEMENT 10 | |
| 23 | Specific assistance to individuals (attach schedule) | | | | |
| 24 | Benefits paid to or for members (attach schedule) | | | | |
| 25 | Compensation of officers, directors, etc | 543,438. | 405,706. | 122,757. | 14,975. |
| 26 | Other salaries and wages | 8,980,018. | 8,539,631. | 86,496. | 353,891. |
| 27 | Pension plan contributions | 510,637. | 485,008. | 5,240. | 20,389. |
| 28 | Other employee benefits | 1,045,578. | 965,164. | 34,677. | 45,737. |
| 29 | Payroll taxes | 691,977. | 657,030. | 10,484. | 24,463. |
| 30 | Professional fundraising fees | | | | |
| 31 | Accounting fees | 49,640. | 42,640. | 7,000. | |
| 32 | Legal fees | 163,080. | 163,080. | | |
| 33 | Supplies | 561,242. | 532,072. | 2,254. | 26,916. |
| 34 | Telephone | 451,523. | 438,687. | 914. | 11,922. |
| 35 | Postage and shipping | 373,195. | 342,544. | 3,929. | 26,722. |
| 36 | Occupancy | 1,540,820. | 1,490,562. | 18,212. | 32,046. |
| 37 | Equipment rental and maintenance | 93,754. | 93,754. | | |
| 38 | Printing and publications | 1,123,254. | 1,069,069. | 4,731. | 49,454. |
| 39 | Travel | 1,868,228. | 1,775,124. | 74,054. | 19,050. |
| 40 | Conferences, conventions, and meetings | 646,683. | 576,465. | 64,271. | 5,947. |
| 41 | Interest | | | | |
| 42 | Depreciation depletion, etc (attach schedule) | 592,519. | 579,584. | 4,682. | 8,253. |
| 43 | Other expenses not covered above (itemize) | | | | |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | SEE STATEMENT 6 | 10,346,509. | 10,079,413. | 26,413. | 240,683. |
| 44 | Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D) carry these totals to lines 13-15 | 29,793,907. | 28,447,345. | 466,114. | 880,448. |

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? | Program Service Expenses (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts but optional for others) |
|--|--|
| NAT'L RESOURCE & TECH CTR FOR MISSING/EXPLOITED CHILDREN | |
| a SEE STATEMENT 7 | |
| (Grants and allocations \$ _____) | 5,960,133. |
| b SEE STATEMENT 8 | |
| (Grants and allocations \$ _____) | 5,579,711. |
| c TRAINING: CONDUCT TRAINING FOR LAW-ENFORCEMENT AGENCIES AND INDIVIDUALS IN THE CRIMINAL-JUSTICE SYSTEM ON THE PROPER HANDLING OF MISSING AND SEXUALLY EXPLOITED CHILD CASES. | |
| (Grants and allocations \$ _____) | 4,519,103. |
| d SEE STATEMENT 9 | |
| (Grants and allocations \$ _____) | 4,390,823. |
| e Other program services (attach schedule) STATEMENT 11 | (Grants and allocations \$ 211,812.) 7,997,575. |
| f Total of Program Service Expenses (should equal line 44, column (B), Program services) | 28,447,345. |

NATIONAL CENTER FOR MISSING AND
EXPLOITED CHILDREN

Form 990 (2002)

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Part IV Balance Sheets

| Note | | (A) | | (B) | |
|---|---|--|------------|--------------------|------------|
| Where required, attached schedules and amounts within the description column should be for end-of-year amounts only | | Beginning of year | | End of year | |
| Assets | 45 | Cash - non-interest-bearing | 96,683. | 45 | 93,118. |
| | 46 | Savings and temporary cash investments | 1,640,222. | 46 | 2,206,318. |
| | 47 a | Accounts receivable | 253,457. | | |
| | b | Less allowance for doubtful accounts | | 47c | 253,457. |
| | 48 a | Pledges receivable | 2,198,638. | | |
| | b | Less allowance for doubtful accounts | | 48c | 2,198,638. |
| | 49 | Grants receivable | 1,550,494. | 49 | 4,024,384. |
| | 50 | Receivables from officers, directors, trustees, and key employees | | 50 | |
| | 51 a | Other notes and loans receivable | | | |
| | b | Less allowance for doubtful accounts | | 51c | |
| | 52 | Inventories for sale or use | | 52 | |
| | 53 | Prepaid expenses and deferred charges | 213,432. | 53 | 146,525. |
| | 54 | Investments - securities STMT 12 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV | 598,260. | 54 | 804,222. |
| | 55 a | Investments - land, buildings, and equipment basis | | | |
| | b | Less accumulated depreciation | | 55c | |
| 56 | Investments - other SEE STATEMENT 13 | 1,453,574. | 56 | 1,304,413. | |
| 57 a | Land, buildings, and equipment basis | 14,327,323. | | | |
| b | Less accumulated depreciation STMT 14 | 2,173,818. | 57c | 12,153,505. | |
| 58 | Other assets (describe SEE STATEMENT 15) | 351,290. | 58 | 636,145. | |
| 59 | Total assets (add lines 45 through 58) (must equal line 74) | 20,191,868. | 59 | 23,820,725. | |
| Liabilities | 60 | Accounts payable and accrued expenses | 1,922,796. | 60 | 2,802,379. |
| | 61 | Grants payable | | 61 | |
| | 62 | Deferred revenue | 20,028. | 62 | 60,000. |
| | 63 | Loans from officers, directors, trustees, and key employees | | 63 | |
| | 64 a | Tax-exempt bond liabilities EXHIBIT 1 | 8,940,260. | 64a | 8,359,329. |
| | b | Mortgages and other notes payable EXHIBIT 1 | 154,447. | 64b | 146,679. |
| 65 | Other liabilities (describe SEE STATEMENT 16) | 98,362. | 65 | 67,243. | |
| 66 | Total liabilities (add lines 60 through 65) | 11,135,893. | 66 | 11,435,630. | |
| 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 | 9,035,784. | 67 | 9,369,938. |
| | 68 | Temporarily restricted | 20,191. | 68 | 3,015,157. |
| | 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) | 9,055,975. | 73 | 12,385,095. | |
| 74 | Total liabilities and net assets / fund balances (add lines 66 and 73) | 20,191,868. | 74 | 23,820,725. | |

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.

NATIONAL CENTER FOR MISSING AND
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| Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return | | 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 | Total expenses and losses per audited financial statements ▶ |
| | 35,124,194. | | 31,795,074. |
| b | Amounts included on line a but not on line 12, Form 990 | b | Amounts included on line a but not on line 17, Form 990 |
| (1) | Net unrealized gains on investments \$ <268,451.> | (1) | Donated services and use of facilities \$ 1,570,049. |
| (2) | Donated services and use of facilities \$ 1,570,049. | (2) | Prior year adjustments reported on line 20, Form 990 \$ |
| (3) | Recoveries of prior year grants \$ | (3) | Losses reported on line 20, Form 990 \$ |
| (4) | Other (specify) STMT 17 \$ 237,263. | (4) | Other (specify) STMT 18 \$ 642,930. |
| | Add amounts on lines (1) through (4) ▶ | | Add amounts on lines (1) through (4) ▶ |
| | b 1,538,861. | | b 2,212,979. |
| c | Line a minus line b ▶ | c | Line a minus line b ▶ |
| | c 33,585,333. | | c 29,582,095. |
| d | Amounts included on line 12, Form 990 but not on line a | d | Amounts included on line 17, Form 990 but not on line a |
| (1) | Investment expenses not included on line 6b, Form 990 \$ | (1) | Investment expenses not included on line 6b, Form 990 \$ |
| (2) | Other (specify) STMT 19 \$ <188,821.> | (2) | Other (specify) STMT 20 \$ 211,812. |
| | Add amounts on lines (1) and (2) ▶ | | Add amounts on lines (1) and (2) ▶ |
| | d <188,821.> | | d 211,812. |
| e | Total revenue per line 12, Form 990 (line c plus line d) ▶ | e | Total expenses per line 17, Form 990 (line c plus line d) ▶ |
| | e 33,396,512. | | e 29,793,907. |

| Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated) | | | | |
|---|--|---|---|--|
| (A) Name and address | (B) Title and average hours per week devoted to position | (C) Compensation (if not paid, enter -0-) | (D) Contributions to employee benefit plans & deferred compensation | (E) Expense account and other allowances |
| ERNEST E. ALLEN 699 PRINCE STREET ALEXANDRIA, VA 22314 | PRESIDENT & CEO 30 | 222,117. | 14,622. | 0. |
| MICHAEL P. LYNCH 699 PRINCE STREET ALEXANDRIA, VA 22314 | VICE PRESIDENT & CFO 40 | 154,678. | 10,345. | 0. |
| JOHN B. RABUN JR. 699 PRINCE STREET ALEXANDRIA, VA 22314 | VICE PRESIDENT & COO 40 | 166,643. | 11,118. | 0. |
| NONCOMPENSATED BOARD MEMBERS SEE EXHIBIT 2 | | | | |
| Directors and officers liability insurance premiums have been paid by the organization. This benefit is being reported in total and is not shown in the allocation of Part V. | | Current Year Premium - | 9,757. | |

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? If "Yes," attach schedule ▶ Yes No STMT 21 Form 990 (2002)

NATIONAL CENTER FOR MISSING AND
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Part VI Other Information

| | | Yes | No |
|------|--|-----|----|
| 76 | Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity | | X |
| 77 | Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes | | X |
| 78 a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? N/A | | |
| 79 | Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement | | X |
| 80 a | Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? | X | |
| b | If "Yes," enter the name of the organization SEE STATEMENT 22 and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt | | |
| 81 a | Enter direct or indirect political expenditures See line 81 instructions 81a 0. | | |
| b | Did the organization file Form 1120-POL for this year? | | 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? | X | |
| b | If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) 82b 1,570,049. | | |
| 83 a | Did the organization comply with the public inspection requirements for returns and exemption applications? | X | |
| b | Did the organization comply with the disclosure requirements relating to quid pro quo contributions? | X | |
| 84 a | Did the organization solicit any contributions or gifts that were not tax deductible? N/A | | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A | | |
| 85 | 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A | | |
| b | Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A | | |
| | 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 | | |
| c | Dues, assessments, and similar amounts from members 85c N/A | | |
| d | Section 162(e) lobbying and political expenditures 85d N/A | | |
| e | Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A | | |
| f | Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A | | |
| g | Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A | | |
| h | If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A | | |
| 86 | 501(c)(7) organizations Enter: a Initiation fees and capital contributions included on line 12 86a N/A | | |
| b | Gross receipts, included on line 12, for public use of club facilities 86b N/A | | |
| 87 | 501(c)(12) organizations Enter: a Gross income from members or shareholders 87a N/A | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 87b N/A | | |
| 88 | At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX | | 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 | | X |
| c | Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0. | | |
| d | Enter: Amount of tax on line 89c, above, reimbursed by the organization 0. | | |
| 90 a | List the states with which a copy of this return is filed SEE EXHIBIT 3 | | |
| b | Number of employees employed in the pay period that includes March 12, 2002 90b 182 | | |
| 91 | The books are in care of THE ORGANIZATION Telephone no 703-274-3900 | | |

Located at **699 PRINCE STREET, ALEXANDRIA, VA**

ZIP + 4 **22314-3175**

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here
and enter the amount of tax-exempt interest received or accrued during the tax year **92** N/A

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Form 990 (2002)

NATIONAL CENTER FOR MISSING AND
EXPLOITED CHILDREN

Form 990 (2002)

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

| | Unrelated business income | | Excluded by section 512, 513, or 514 | | (E) Related or exempt function income |
|--|---------------------------|---------------|--------------------------------------|---------------|---|
| | (A) Business code | (B) Amount | (C) Exclusion code | (D) Amount | |
| 93 Program service revenue | | | | | |
| a BULK PUBLICATION SALES | | | | | 40,012. |
| b PROGRAM FEES | | | | | 67,644. |
| c KIDS AND COMPANY KITS | | | | | 31,146. |
| d _____ | | | | | |
| e _____ | | | | | |
| f Medicare/Medicaid payments | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 94 Membership dues and assessments | | | | | |
| 95 Interest on savings and temporary cash investments | | | 14 | 45,612. | |
| 96 Dividends and interest from securities | | | | | |
| 97 Net rental income or (loss) from real estate | | | | | |
| a debt-financed property | | | 30 | <102,195.> | |
| b not debt-financed property | | | 16 | <2,054.> | |
| 98 Net rental income or (loss) from personal property | | | | | |
| 99 Other investment income | | | | | |
| 100 Gain or (loss) from sales of assets other than inventory | | | 18 | <30,339.> | |
| 101 Net income or (loss) from special events | | | 01 | 700,506. | |
| 102 Gross profit or (loss) from sales of inventory | | | | | |
| 103 Other revenue | | | | | |
| a _____ | | | | | |
| b _____ | | | | | |
| c _____ | | | | | |
| d _____ | | | | | |
| e _____ | | | | | |
| 104 Subtotal (add columns (B), (D), and (E)) | | 0. | | 611,530. | 138,802. |
| 105 Total (add line 104, columns (B), (D), and (E)) | | | | | 750,332. |

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 32 of the instructions)

| Line No | Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes) |
|---------|--|
| ▼ | SEE STATEMENT 23 |
| | |
| | |

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions)

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

Part X Information Regarding Transfers Associated with

(a) Did the organization, during the year, receive any funds, directly or indirectly, from a disqualified person?
(b) Did the organization, during the year, pay premiums, directly or indirectly, on a contract described in section 501(c)(17)?
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 furnished to him.

Signature of officer: [Signature] Date: [Date]

Paid Preparer's Use Only: Preparer's signature: [Signature] CPA

Firm's name (or yours if self-employed) address, and ZIP + 4: GRANT THORNTON LLP, 2070 CHAIN BRIDGE ROAD, VIENNA, VA 22182

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information-(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2002

Name of the organization **NATIONAL CENTER FOR MISSING AND EXPLOITED CHILDREN** Employer identification number **52 1328557**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

| (a) Name and address of each employee paid more than \$50,000 | (b) Title and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans & deferred compensation | (e) Expense account and other allowances |
|---|--|------------------|---|--|
| RICK MINICUCCI ----- HERNDON, VA | CTO 37.5 | 137,692. | 9,772. | 0. |
| PEGGYANN FLICK ----- HARPERS FERRY, WV | DIR-IT 37.5 | 112,629. | 7,985. | 0. |
| DANIEL ARMAUGH ----- BETHESDA, MD | DIR LEGAL ED 37.5 | 107,712. | 7,605. | 0. |
| DAVID SHAPIRO ----- SPRINGFIELD, VA | DIR-OUTREACH 37.5 | 105,810. | 7,639. | 0. |
| BEN ERMINI ----- GAINESVILLE, VA | DIR-MISSING 37.5 | 92,226. | 6,701. | 0. |
| Total number of other employees paid over \$50,000 ▶ | 63 | | | |

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms) if there are none, enter "None.")

| (a) Name and address of each independent contractor paid more than \$50,000 | (b) Type of service | (c) Compensation |
|---|--------------------------|------------------|
| FOX VALLEY TECHNICAL COLLEGE ----- APPLETON, WI 54913 | LAW ENFORCEMENT TRAINING | 2407941. |
| SUN MICROSYSTEMS ----- 7900 WESTPARK DR., MCLEAN, VA 22102 | TECHNOLOGICAL SERVICES | 879,284. |
| VIEWPOINT ----- 11778 S. ELECTION DR., DRAPER, UT 84020 | SOFTWARE DEVELOPMENT | 500,000. |
| PROSKAUER ROSE, LLP ----- 1233 20TH ST., NW, WASHINGTON, DC 20036 | LEGAL COUNSEL | 133,782. |
| TRILOGY NETWORK SERVICES ----- NORTH SIOUX CITY, ND 57049 | TECHNOLOGICAL SERVICES | 176,250. |
| Total number of others receiving over \$50,000 for professional services ▶ | 7 | |

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

1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)

| | Yes | No |
|----|-----|----|
| 1 | | X |
| 2a | | X |
| 2b | | X |
| 2c | | X |
| 2d | X | |
| 2e | | X |
| 3 | | X |
| 4 | 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) **SEE STATEMENT 24**

a Sale, exchange, or leasing of property?

b Lending of money or other extension of credit?

c Furnishing of goods, services, or facilities?

d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? **SEE PART V, FORM 990**

e Transfer of any part of its income or assets?

3 Does the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below)

4 Do you have a section 403(b) annuity plan for your employees?

Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.

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

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

5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)

7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)

9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ _____

10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)

11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)

11b A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)

12 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A)

13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

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

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

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

NATIONAL CENTER FOR MISSING AND

Schedule A (Form 990 or 990-EZ) 2002 **EXPLOITED CHILDREN**

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting
 Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

| Calendar year (or fiscal year beginning in) | (a) 2001 | (b) 2000 | (c) 1999 | (d) 1998 | (e) Total |
|--|-------------|-------------|------------------------------|-------------|-----------------|
| 15 Gifts, grants, and contributions received (Do not include unusual grants See line 28) | 20,288,914. | 19,210,067. | 15,508,065. | 14,305,038. | 69,312,084. |
| 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 | 144,660. | 204,659. | 204,667. | 283,205. | 837,191. |
| 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 | 64,927. | 76,618. | 149,070. | 165,722. | 456,337. |
| 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 | 469,249. | 434,224. | SEE STATEMENT 25 288,451. | 324,819. | 1,516,743. |
| 23 Total of lines 15 through 22 | 20,967,750. | 19,925,568. | 16,150,253. | 15,078,784. | 72,122,355. |
| 24 Line 23 minus line 17 | 20,823,090. | 19,720,909. | 15,945,586. | 14,795,579. | 71,285,164. |
| 25 Enter 1% of line 23 | 209,678. | 199,256. | 161,503. | 150,788. | |
| 26 Organizations described on lines 10 or 11 a Enter 2% of amount in column (e), line 24 | | | | | 26a 1,425,703. |
| b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a Do not file this list with your return Enter the sum of all these excess amounts | | | | | 26b 4,389,458. |
| c Total support for section 509(a)(1) test Enter line 24, column (e) | | | | | 26c 71,285,164. |
| d Add Amounts from column (e) for lines 18 456,337. 19 1,516,743. 22 1,516,743. 26b 4,389,458. | | | | | 26d 6,362,538. |
| e Public support (line 26c minus line 26d total) | | | | | 26e 64,922,626. |
| f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) | | | | | 26f 91.0745% |
| 27 Organizations described on line 12 a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return Enter the sum of such amounts for each year N/A | | | | | |
| (2001) (2000) (1999) (1998) | | | | | |
| b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year N/A | | | | | |
| (2001) (2000) (1999) (1998) | | | | | |
| c Add Amounts from column (e) for lines 15 16 17 20 21 | | | | | 27c N/A |
| d Add Line 27a total and line 27b total | | | | | 27d N/A |
| e Public support (line 27c total minus line 27d total) | | | | | 27e N/A |
| f Total support for section 509(a)(2) test Enter amount on line 23, column (e) 27f N/A | | | | | |
| g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) | | | | | 27g N/A % |
| h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) | | | | | 27h N/A % |
| 28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return Do not include these grants in line 15 | | | | | NONE |

Part V Private School Questionnaire (See page 7 of the instructions)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

| | | Yes | No |
|-------|--|-----|----|
| 29 | Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? | | |
| 30 | Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? | | |
| 31 | Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement) | | |
| _____ | | | |
| _____ | | | |
| 32 | Does the organization maintain the following | | |
| a | Records indicating the racial composition of the student body, faculty, and administrative staff? | | |
| 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 page 9 of the instructions)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

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

| Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred) | | (a) Affiliated group totals | (b) To be completed for ALL electing organizations |
|--|--|-----------------------------------|--|
| | | N/A | |
| 36 | Total lobbying expenditures to influence public opinion (grassroots lobbying) | 36 | |
| 37 | Total lobbying expenditures to influence a legislative body (direct lobbying) | 37 | |
| 38 | Total lobbying expenditures (add lines 36 and 37) | 38 | |
| 39 | Other exempt purpose expenditures | 39 | |
| 40 | Total exempt purpose expenditures (add lines 38 and 39) | 40 | |
| 41 | Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is - Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000 | 41 | |
| 42 | Grassroots nontaxable amount (enter 25% of line 41) | 42 | |
| 43 | Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36 | 43 | |
| 44 | Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38 | 44 | |

Caution If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 11 of the instructions)

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

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

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)

| Yes | No | Amount |
|-----|----|--------|
| | X | |
| | X | |
| | X | |
| | X | |
| | X | |
| | X | |
| | X | |
| | X | |
| | X | |
| | | 0. |

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 page 12 of the 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

(i) Cash

(ii) Other assets

b Other transactions

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

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

Table with 2 columns: Yes, No. Rows include 51a(i), a(ii), b(i), b(ii), b(iii), b(iv), b(v), b(vi), and c. All 'No' boxes are checked with an 'X'.

N/A

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. The table is mostly empty.

52 a 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 (X) No

b If "Yes," complete the following schedule

N/A

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. The table is mostly empty.

| Asset No | Description | Date Acquired | Method | Life | Line No | Unadjusted Cost Or Basis | Bus % Excl | Reduction In Basis | Basis For Depreciation | Accumulated Depreciation | Current Sec 179 | Amount Of Depreciation |
|----------|-------------------------------|---------------|--------|------|---------|--------------------------|------------|--------------------|------------------------|--------------------------|-----------------|------------------------|
| | LAND | | | | | | | | | | | |
| 1 | LAND | VARIES | | .000 | 16 | 1385005. | | | 1385005. | | | 0. |
| | * 990 PAGE 2 TOTAL | | | | | | | | | | | |
| | LAND | | | | | 1385005. | | 0. | 1385005. | 0. | 0. | 0. |
| | OTHER FURNITURE AND EQUIPMENT | VARIES | | .000 | 16 | 996,335. | | | 996,335. | 622,264. | | 195,733. |
| 2 | EQUIPMENT | VARIES | | .000 | 16 | 996,335. | | | 996,335. | 622,264. | | 195,733. |
| | 3 BUILDING | VARIES | | .000 | 16 | 11945983. | | | 11945983. | 959,035. | | 396,786. |
| | * 990 PAGE 2 TOTAL | | | | | | | | | | | |
| | OTHER | | | | | 12942318. | | 0. | 12942318. | 1581299. | 0. | 592,519. |
| | * GRAND TOTAL 990 PAGE 2 DEPR | | | | | 14327323. | | 0. | 14327323. | 1581299. | 0. | 592,519. |

FORM 990 RENTAL INCOME STATEMENT 1

| KIND AND LOCATION OF PROPERTY | ACTIVITY NUMBER | GROSS RENTAL INCOME |
|------------------------------------|--------------------|------------------------|
| CALIFORNIA OFFICE BUILDING | 1 | 11,947. |
| VIRGINIA OFFICE BUILDING | 2 | 72,625. |
| TOTAL TO FORM 990, PART I, LINE 6A | | 84,572. |

FORM 990 RENTAL EXPENSES STATEMENT 2

| DESCRIPTION | ACTIVITY NUMBER | AMOUNT | TOTAL |
|---|-----------------|----------|----------|
| OPERATING EXPENSES AND DEPRECIATION - CALIF | | 14,001. | |
| - SUBTOTAL - | 1 | | 14,001. |
| OPERATING EXPENSES AND DEPRECIATION - VA | | 174,820. | |
| - SUBTOTAL - | 2 | | 174,820. |
| TOTAL TO FORM 990, PART I, LINE 6B | | | 188,821. |

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

| DESCRIPTION | GROSS SALES PRICE | COST OR OTHER BASIS | EXPENSE OF SALE | NET GAIN OR (LOSS) |
|-----------------------------|----------------------|------------------------|--------------------|-----------------------|
| SECURITIES | 552,700. | 583,039. | 0. | <30,339.> |
| TO FORM 990, PART I, LINE 8 | 552,700. | 583,039. | 0. | <30,339.> |

| FORM 990 | OTHER CHANGES IN NET ASSETS OR FUND BALANCES | STATEMENT | 4 |
|--|--|------------|---|
| DESCRIPTION | | AMOUNT | |
| UNREALIZED LOSS ON INVESTMENTS | | <268,451.> | |
| CURRENT YEAR DECREASE IN VALUE OF UNITRUST AGREEMENT | | <5,034.> | |
| TOTAL TO FORM 990, PART I, LINE 20 | | <273,485.> | |

FORM 990

SPECIAL EVENTS AND ACTIVITIES

STATEMENT 5

| DESCRIPTION OF EVENT | GROSS RECEIPTS | CONTRIBUT. INCLUDED | GROSS REVENUE | DIRECT EXPENSES | NET INCOME |
|--|-------------------|---------------------|-------------------|-----------------|-----------------|
| AUCTION, PALM BEACH, FL | 415,574. | 27,083. | 388,491. | 138,931. | 249,560. |
| AUCTION, NEW YORK | 455,616. | 50,000. | 405,616. | 135,746. | 269,870. |
| NY BIKE RIDE | 216,807. | 39,372. | 177,435. | 19,829. | 157,606. |
| OTHER EVENTS (DINNERS, DANCES, CARNIVALS RAFFLES, BINGO) | 735,936. | 362,662. | 373,274. | 349,804. | 23,470. |
| TO FM 990, PART I, LINE 9 | <u>1,823,933.</u> | <u>479,117.</u> | <u>1,344,816.</u> | <u>644,310.</u> | <u>700,506.</u> |

FORM 990

OTHER EXPENSES

STATEMENT 6

| DESCRIPTION | (A) TOTAL | (B) PROGRAM SERVICES | (C) MANAGEMENT AND GENERAL | (D) FUNDRAISING |
|------------------------|--------------|----------------------------|----------------------------------|--------------------|
| USER FEES | 190,133. | 122,472. | 8,977. | 58,684. |
| PROFESSIONAL FEES | 5,263,951. | 5,149,460. | 19,664. | 94,827. |
| INSURANCE | 103,831. | 91,722. | | 12,109. |
| EQUIPMENT EXPENSED | 4,473,643. | 4,473,643. | | |
| GENERAL EXPENSE | 165,448. | 146,830. | | 18,618. |
| SPECIAL EVENTS | 195,837. | 138,283. | | 57,554. |
| OTHER | 142,487. | 139,668. | | 2,819. |
| RENTAL EXPENSE | <188,821.> | <182,665.> | <2,228.> | <3,928.> |
| TOTAL TO FM 990, LN 43 | 10,346,509. | 10,079,413. | 26,413. | 240,683. |

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT 7

DESCRIPTION OF PROGRAM SERVICE ONE

COMMUNITY OUTREACH: COORDINATION OF AND WITH PUBLIC/PRIVATE PROGRAMS WHICH HELP TO LOCATE, RECOVER, OR REUNITE MISSING CHILDREN WITH THEIR LEGAL CUSTODIANS AND PROVIDE INFORMATION ON WAYS TO PREVENT THE SEXUAL EXPLOITATION OF CHILDREN.

TO FORM 990, PART III, LINE A

GRANTS

EXPENSES

5,960,133.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT

8

DESCRIPTION OF PROGRAM SERVICE TWO

CYBER SAFETY: OPERATION OF THE NATIONAL CYBERTIPLINE WHERE REPORTS OF CHILD EXPLOITATION ON THE INTERNET ARE CAPTURED FOR LAW ENFORCEMENT AND DEVELOPMENT OF THE NETSMARTZ INTERNET SAFETY PROGRAM FOR CHILDREN.

GRANTS

EXPENSES

TO FORM 990, PART III, LINE B

5,579,711.

FORM 990

STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

STATEMENT 9

DESCRIPTION OF PROGRAM SERVICE FOUR

CASE MANAGEMENT: PROVISION OF TECHNICAL ASSISTANCE TO LAW-ENFORCEMENT AGENCIES, STATE/LOCAL GOVERNMENTS, ELEMENTS OF THE CRIMINAL JUSTICE SYSTEM, AND PUBLIC/PRIVATE AGENCIES TO ASSIST MISSING AND SEXUALLY EXPLOITED CHILDREN.

GRANTS

EXPENSES

TO FORM 990, PART III, LINE D

4,390,823.

FORM 990

CASH GRANTS AND ALLOCATIONS

STATEMENT 10

| <u>CLASSIFICATION</u> | <u>DONEE'S NAME</u> | <u>DONEE'S ADDRESS</u> | <u>DONEE'S RELATIONSHIP</u> | <u>AMOUNT</u> |
|--|---------------------|------------------------|-----------------------------|-----------------|
| | ICMEC | | RELATED 501(C)(3) | 211,812. |
| TOTAL INCLUDED ON FORM 990, PART II, LINE 22 | | | | <u>211,812.</u> |

FORM 990

OTHER PROGRAM SERVICES

STATEMENT 11

| DESCRIPTION | GRANTS AND ALLOCATIONS | EXPENSES |
|--|------------------------|------------|
| PUBLIC EDUCATION AND AWARENESS: DISSEMINATION OF INFORMATION ABOUT INNOVATIVE AND MODEL MISSING AND SEXUALLY EXPLOITED CHILD PROGRAMS, SERVICES, AND LAWS TO RAISE PUBLIC AWARENESS AND RESPONSE TO THESE INCIDENTS. ***** | | 4,357,779. |
| HOTLINE AND PHOTO DISTRIBUTION: OPERATION OF A NATIONAL TOLL-FREE HOTLINE WHERE INDIVIDUALS MAY REPORT INFORMATION REGARDING MISSING AND SEXUALLY EXPLOITED CHILDREN AND DISSEMINATION OF PHOTOGRAPHS TO ASSIST IN LOCATING MISSING CHILDREN. ***** | | 2,566,463. |
| INTERNATIONAL GLOBAL NETWORK: COORDINATION OF CASES WHEN CHILDREN ARE TAKEN OVER INTERNATIONAL BORDERS AND EXPANSION OF THE U.S. CLEARINGHOUSE MODEL IN THE INTERNATIONAL ARENA. | 211,812. | 1,073,333. |
| TOTAL TO FORM 990, PART III, LINE E | 211,812. | 7,997,575. |

FORM 990

NON-GOVERNMENT SECURITIES

STATEMENT 12

| SECURITY DESCRIPTION | CORPORATE STOCKS | CORPORATE BONDS | OTHER PUBLICLY TRADED SECURITIES | OTHER SECURITIES | TOTAL NON-GOV'T SECURITIES |
|----------------------|------------------|-----------------|----------------------------------|------------------|----------------------------|
| EQUITY SECURITIES | 122,590. | | | | 122,590. |
| MONEY MARKET | 681,632. | | | | 681,632. |
| TO 990, LN 54 COL B | 804,222. | | | | 804,222. |

FORM 990

OTHER INVESTMENTS

STATEMENT 13

| DESCRIPTION | VALUATION METHOD | AMOUNT |
|---|---------------------|------------|
| EMERY CHARITABLE REMAINDER TRUST | MARKET VALUE | 82,400. |
| BOARD DIRECTED ENDOWMENT TRUST | MARKET VALUE | 1,222,013. |
| TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B | | 1,304,413. |

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 14

| DESCRIPTION | COST OR OTHER BASIS | ACCUMULATED DEPRECIATION | BOOK VALUE |
|-----------------------------------|------------------------|-----------------------------|-------------|
| LAND | 1,385,005. | 0. | 1,385,005. |
| FURNITURE AND EQUIPMENT | 996,335. | 817,997. | 178,338. |
| BUILDING | 11,945,983. | 1,355,821. | 10,590,162. |
| TOTAL TO FORM 990, PART IV, LN 57 | 14,327,323. | 2,173,818. | 12,153,505. |

| FORM 990 | OTHER ASSETS | STATEMENT 15 |
|---|--------------|--------------|
| DESCRIPTION | AMOUNT | |
| CASH VALUE OF LIFE INSURANCE | 376,745. | |
| OTHER ASSETS | 259,400. | |
| TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B | 636,145. | |

| FORM 990 | OTHER LIABILITIES | STATEMENT 16 |
|---|-------------------|--------------|
| DESCRIPTION | | AMOUNT |
| LIABILITY UNDER UNITRUST AGREEMENT | | 67,243. |
| TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B | | 67,243. |

FORM 990 OTHER REVENUE NOT INCLUDED ON FORM 990 STATEMENT 17

| DESCRIPTION | AMOUNT |
|--|-----------------|
| RECLASSIFIED ICMEC REVENUE | 242,297. |
| CURRENT YEAR DECREASE IN VALUE OF UNITRUST AGREEMENT | <5,034.> |
| TOTAL TO FORM 990, PART IV-A | <u>237,263.</u> |

FORM 990 OTHER EXPENSES NOT INCLUDED ON FORM 990 STATEMENT 18

| DESCRIPTION | AMOUNT |
|------------------------------|-----------------|
| RECLASSIFIED RENTAL EXPENSES | 188,821. |
| RECLASSIFIED ICMEC EXPENSES | 454,109. |
| TOTAL TO FORM 990, PART IV-B | <u>642,930.</u> |

| FORM 990 | OTHER REVENUE INCLUDED ON FORM 990 | STATEMENT 19 |
|------------------------------|------------------------------------|-------------------------|
| <u>DESCRIPTION</u> | | <u>AMOUNT</u> |
| RECLASSIFIED RENTAL EXPENSES | | <u><188,821.></u> |
| TOTAL TO FORM 990, PART IV-A | | <u><188,821.></u> |

| FORM 990 | OTHER EXPENSES INCLUDED ON FORM 990 | STATEMENT 20 |
|------------------------------|-------------------------------------|--------------|
| DESCRIPTION | | AMOUNT |
| CONTRIBUTION TO ICMEC | | 211,812. |
| TOTAL TO FORM 990, PART IV-B | | 211,812. |

FORM 990

PART V - OFFICER COMPENSATION FROM
RELATED ORGANIZATIONS

STATEMENT 21

| OFFICER'S NAME | NAME OF RELATED ORGANIZATION | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | EXPENSE ACCOUNT |
|-----------------|---|-------------------|---------------------------------|--------------------|
| ERNEST E. ALLEN | INTERNATIONAL CENTRE FOR MISSING AND EXPLOITED CHILDREN | 77,385. | 18,010. | 0. |

FORM 990

IDENTIFICATION OF RELATED ORGANIZATIONS
PART VI, LINE 80B

STATEMENT 22

NAME OF ORGANIZATION

EXEMPT

NONEXEMPT

INTERNATIONAL CENTRE FOR MISSING AND EXPLOITED
CHILDREN

X

FORM 990

PART VIII - RELATIONSHIP OF ACTIVITIES TO
ACCOMPLISHMENT OF EXEMPT PURPOSES

STATEMENT 23

| LINE | EXPLANATION OF RELATIONSHIP OF ACTIVITIES |
|------|---|
| 93A | PUBLICATION SALES TO DISSEMINATE EDUCATIONAL INFORMATION IN QUANTITY TO THE PUBLIC. MATERIAL COST RECOVERY ONLY. |
| 93B | TRAINING TO LAW ENFORCEMENT AGENCIES, STATE AND LOCAL GOVERNMENTS, PUBLIC AND NON-PROFIT AGENCIES AND INDIVIDUALS IN THE AREA OF MISSING & EXPLOITED CHILDREN. MATERIAL COST RECOVERY ONLY. |
| 93C | SALE OF "KIDS AND COMPANY" TOGETHER FOR SAFETY CURRICULUM TO PUBLIC AND PRIVATE SCHOOLS AND AGENCIES TO TEACH CHILD SAFETY. MATERIAL COST RECOVERY ONLY. |

SCHEDULE A

STATEMENT REGARDING ACTIVITIES WITH
 SUBSTANTIAL CONTRIBUTORS, TRUSTEES, DIRECTORS,
 CREATORS, KEY EMPLOYEES, ETC.,
 PART III, LINE 2

STATEMENT 24

THE FOLLOWING BOARD MEMBERS RECEIVED TRAVELING REIMBURSEMENTS OVER \$1,000
 DURING THE 2002 CALENDAR YEAR:

| | |
|---------------------|-------|
| ROBERT HANNERMAN | 3,211 |
| NANCY DUBE | 2,103 |
| LARRY MAGID | 1,934 |
| CRAIG HILL | 1,132 |
| GILBERT GALLEGOS | 1,088 |
| PATRICIA WETTERLING | 1,088 |

| SCHEDULE A | OTHER INCOME | | | STATEMENT 25 |
|------------------------------|----------------|----------------|----------------|----------------|
| DESCRIPTION | 2001 AMOUNT | 2000 AMOUNT | 1999 AMOUNT | 1998 AMOUNT |
| SPECIAL EVENT INCOME | 469,249. | 434,224. | 288,451. | 324,819. |
| TOTAL TO SCHEDULE A, LINE 22 | 469,249. | 434,224. | 288,451. | 324,819. |

**National Center for Missing and Exploited Children
52-1328557
2002 Form 990, Part IV, Line 64
December 31, 2002**

Virginia Building Mortgage (Tax Exempt Bond)

| | |
|--------------------------------------|----------------|
| Loan Balance 12/31/01 | \$ 8,940,260 |
| Less principle payments paid in 2002 | <u>580,931</u> |
| Loan Balance 12/31/02 | \$ 8,359,329 |

Mortgage loan obtained using tax-exempt bonds for \$10,000,000 in December 1999, for an office building located in Alexandria, Virginia. Building was renovated in 1999 and occupied by the charity as its national headquarters building. The Virginia property has one tenant under a non-renewable long-term lease. The building is 94% leased to tenants and 90.6% available for use by the Charity. Entire building will be used exclusively for charitable purposes as soon as the existing lease expires.

New York Office Building Mortgage.

| | |
|---------------------------------------|--------------|
| Loan Balance 12/31/01 | \$154,447 |
| Less. principle payments paid in 2002 | <u>7,768</u> |
| Loan Balance 12/31/02 | \$146,679 |

Mortgage loan obtained for \$175,000, in December 1998, of the \$444,820 cost of an office building located in Rochester, New York from First National Bank, Rochester, New York.

National Center for Missing And Exploited Children Board of Directors

Ms. Cordelia Anderson
Minneapolis, MN 55409
Term Expires 2004

Mr. Hubert Bell
Washington, DC 20555
Term Expires 2004

Ms. Lucy Berliner
Seattle, WA 98104
Term Expires 2004

Ms. Louis Bivona
Rochester, NY 14614
Term Expires: 2004

Dr. Daniel D. Broughton
Rochester, MN 55905
Term Expires: 2003

Honorable Arnold I. Burns
New York, NY 10105
Term Expires 2004

Mr. Gerald Buten
Washington, DC 20535
Term Expires 2003

Mr. Robbie Callaway
Rockville, MD 20852
Term Expires. 2003

Mr. James Cannavino
New York, NY 10017
Term Expires. 2004

Mr. Mike Christiansen
Ft. Lauderdale, FL 33304
Term Expires: 2003

Mr. Harry Custis
Alexandria, VA 22314
Term Expires: 2004

Mr. Howard Davidson
Washington, DC 20005
Term Expires 2004

Honorable Dennis DeConcini
Washington, DC 20016
Term Expires: 2004

Ms. Patricia Defibaugh
Malvern, PA 19355
Term Expires: 2003

Mr. Jack Dickman
Glen Ellyn, IL 60137
Term Expires. 2005

Ms. Nancy Dube
Cotuit, MA 02635
Term Expires 2003

Mr. Louis Freeh
Wilmington, DE 19884-0135
Term Expires: 2004

Mr. Gilbert Gallegos
Albuquerque, NM 87109
Term Expires: 2004

Mr. Vincent P. Giuliano
Windsor, CT 06095
Term Expires: 2003

Dr. Robert Hanneman
West Lafayette, IN 47096
Term Expires: 2005

Mr. Lee Heath
Washington, DC 20260-2100
Term Expires. 2003

Captain Craig Hill
Leawood, KS 66211
Term Expires 2003

Mr. Kenneth Hunter
Arlington, VA 22203
Term Expires: 2005

Mr. John Kelly, Jr
Mitchville, MD 20721-2434
Term Expires 2004

Mr. Richard R. Kolodziej
Washington, DC 20001
Term Expires: 2004

Mr. Thomas Kriedler
McLean, VA 22102
Term Expires: 2004

Mr. Martin Lerner
Manhasset, NY 11030
Term Expires: 2005

Mr. John Libonati
Washington, DC 20005
Term Expires: 2005

Honorable Jim Lightfoot
Washington, DC 20001
Term Expires 2003

Dr. Larry Magid
Palo Alto, CA 94303
Term Expires 2003

Mr. Douglas L. Matthews
New York, NY 10048
Term Expires. 2005

Mr. Jim McDonnell
Cupertino, CA 95014
Term Expires 2003

Mr. Richard Mercier
Washington, DC 20220
Term Expires: 2003

National Center for Missing And Exploited Children Board of Directors

Honorable Mike Moore
Jackson, MS 39205
Term Expires 2004

Ms. Collen Nick
Alma, AR 72921
Term Expires. 2003

Mr Ralph Parilla
Plantation, FL 33317
Term Expires. 2003

Mr. Lindsey Perry
Boca Raton, FL 33433
Term Expires 2004

Mr Leonard Pfeiffer IV
Washington, DC 20006
Term Expires 2004

Mr. John Ryan
Dulles, VA 20166
Term Expires 2003

Ms Susannah Schaefer
Islandia, NY 11749
Term Expires 2003

Mr. Mark N. Sirangelo
Pasadena, CA 91102
Term Expires. 2005

Mr Brian L. Stafford
Washington, DC 20001
Term Expires 2005

Dr Ozell Sutton
Atlanta, GA 30303
Term Expires. 2005

Ms Reve' Walsh
C/O NCMEC/FL
Lake Park, FL 33403-1445
Term Expires. 2003

Ms. Patty Wetterling
St Joseph, MN 56374
Term Expires: 2004

Ms. Lucy Berliner
Seatte, WA 98104
Term Expires 2004

**National Center for Missing and Exploited Children
 52-1328557
 2002 Form 990, Part VI, Line 90
 December 31, 2002**

List of State where a copy of the Form 990 is filed:

| | |
|----------------------|---------------|
| Alaska | Tennessee |
| Arizona | Utah |
| California | Virginia |
| Connecticut | Washington |
| District of Columbia | West Virginia |
| Florida | Wisconsin |
| Georgia | |
| Hawaii | |
| Illinois | |
| Kansas | |
| Kentucky | |
| Maine | |
| Maryland | |
| Massachusetts | |
| Michigan | |
| Minnesota | |
| Missouri | |
| New Hampshire | |
| New Jersey | |
| New Mexico | |
| New York | |
| North Carolina | |
| North Dakota | |
| Ohio | |
| Oklahoma | |
| Oregon | |
| Pennsylvania | |
| Rhode Island | |
| South Carolina | |
| South Dakota | |