

Return of Organization Exempt From Income Tax

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

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 2002 calendar year, or tax year period beginning **OCT 1, 2002** and ending **SEP 30, 2003**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization THE AYN RAND INSTITUTE; THE CENTER FOR THE ADVANCEMENT OF OBJECTIVISM		D Employer identification number 22-2570926
		Number and street (or P.O. box if mail is not delivered to street address) 2121 ALTON PARKWAY		Room/suite 250
		City or town, state or country, and ZIP + 4 IRVINE, CA 92606		E Telephone number (949) 222-6550

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: **N/A**

J Organization type (check only one) 501(c) (**03**) (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.

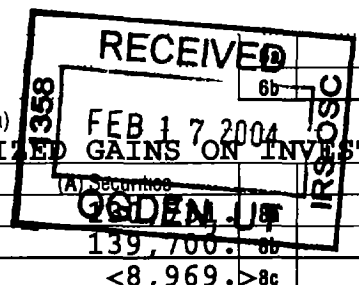
L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **>** **3,653,243.**

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

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

SCANNED FEB 23 '04 Revenue

1	Contributions, gifts, grants, and similar amounts received:		
a	Direct public support	1a	3,457,176.
b	Indirect public support	1b	
c	Government contributions (grants)	1c	
d	Total (add lines 1a through 1c) (cash \$ 3,292,176. noncash \$ 165,000.)	1d	3,457,176.
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	
3	Membership dues and assessments	3	
4	Interest on savings and temporary cash investments	4	
5	Dividends and interest from securities	5	704.
6 a	Gross rents	6a	
b	Less: rental expenses	6b	
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c	
7	Other investment income (describe UNREALIZED GAINS ON INVESTMENTS)	7	24,668.
8 a	Gross amount from sale of assets other than inventory	8a	
b	Less: cost or other basis and sales expenses	8b	139,700.
c	Gain or (loss) (attach schedule)	8c	<8,969.>
d	Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 1	8d	<8,969.>
9	Special events and activities (attach schedule)		
a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a	
b	Less: direct expenses other than fundraising expenses	9b	
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	
10 a	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	39,964.
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	3,513,543.
13	Program services (from line 44, column (B))	13	2,118,055.
14	Management and general (from line 44, column (C))	14	783,541.
15	Fundraising (from line 44, column (D))	15	854,623.
16	Payments to affiliates (attach schedule)	16	
17	Total expenses (add lines 16 and 44, column (A))	17	3,756,219.
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	<242,676.>
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	621,460.
20	Other changes in net assets or fund balances (attach explanation)	20	0.
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	378,784.



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**THE AYN RAND INSTITUTE, THE CENTER FOR
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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.

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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 \$ _____ noncash \$ _____				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	488,676.	225,306.	144,636.	118,734.
26	Other salaries and wages	988,565.	455,780.	292,590.	240,195.
27	Pension plan contributions				
28	Other employee benefits				
29	Payroll taxes				
30	Professional fundraising fees				
31	Accounting fees	23,284.		12,716.	10,568.
32	Legal fees				
33	Supplies	52,190.	6,495.	32,961.	12,734.
34	Telephone	72,259.	22,912.	35,389.	13,958.
35	Postage and shipping	161,997.	119,216.	114.	42,667.
36	Occupancy	271,212.	143,660.	50,198.	77,354.
37	Equipment rental and maintenance	13,163.	<1,967.>	14,235.	895.
38	Printing and publications	316,711.	210,449.	1,240.	105,022.
39	Travel	74,381.	51,270.	5,940.	17,171.
40	Conferences, conventions, and meetings	10,855.	5,598.	3,076.	2,181.
41	Interest				
42	Depreciation, depletion, etc. (attach schedule)	14,753.		14,753.	
43	Other expenses not covered above (itemize):				
a	_____				
b	_____				
c	_____				
d	_____				
e	SEE STATEMENT 2	1,268,173.	879,336.	175,693.	213,144.
44	Total functional expenses (add lines 22 through 43) <small>Organizations completing columns (B)-(D), carry these totals to lines 13-15</small>	3,756,219.	2,118,055.	783,541.	854,623.

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? **SEE STATEMENT 3**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)

a EDUCATION		
	(Grants and allocations \$ _____)	564,577.
b INTELLECTUAL SUPPORT PROGRAM		
	(Grants and allocations \$ _____)	447,869.
c MEDIA		
	(Grants and allocations \$ _____)	246,222.
d ARCHIVES		
	(Grants and allocations \$ _____)	215,506.
e Other program services (attach schedule)	STATEMENT 4	643,881.
f Total of Program Service Expenses (should equal line 44, column (B), Program services)		2,118,055.

Part IV Balance Sheets

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	203,310.	209,226.
	46 Savings and temporary cash investments	42,209.	
	47 a Accounts receivable	47a	
	b Less: allowance for doubtful accounts	47b	47c
	48 a Pledges receivable	48a 265,207.	
	b Less: allowance for doubtful accounts	48b	48c 265,207.
	49 Grants receivable		49
	50 Receivables from officers, directors, trustees, and key employees		50
	51 a Other notes and loans receivable	51a 25,299.	
	b Less: allowance for doubtful accounts	51b	51c 25,299.
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges	41,650.	53
	54 Investments - securities STMT 5 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	612,005.	54 861,234.
	55 a Investments - land, buildings, and equipment: basis	55a	
	b Less: accumulated depreciation	55b	55c
56 Investments - other	97,641.	56	
57 a Land, buildings, and equipment: basis	57a 165,071.		
b Less: accumulated depreciation	57b 114,642.	57c 50,429.	
58 Other assets (describe SEE STATEMENT 6)	19,722.	58 294,570.	
59 Total assets (add lines 45 through 58) (must equal line 74)	1,291,000.	59 1,705,965.	
Liabilities	60 Accounts payable and accrued expenses	88,081.	60 175,828.
	61 Grants payable		61
	62 Deferred revenue		62
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable		64b
	65 Other liabilities (describe SEE STATEMENT 7)	581,459.	65 1,151,353.
66 Total liabilities (add lines 60 through 65)	669,540.	66 1,327,181.	
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	405,128.	67 9,351.
	68 Temporarily restricted	216,332.	68 369,433.
	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)	621,460.	73 378,784.	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	1,291,000.	74 1,705,965.	

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.

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Part VI Other Information. Table with columns: Question, Yes, No. Rows 76-92. Includes questions about IRS reporting, political expenditures, lobbying, and tax-exempt status.

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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) Exclu- sion code	(D) Amount	
Note: Enter gross amounts unless otherwise indicated.					
93 Program service revenue:					
a _____					
b _____					
c _____					
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					
96 Dividends and interest from securities			14	704.	
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 personal property					
99 Other investment income			14	24,668.	
100 Gain or (loss) from sales of assets other than inventory			14	<8,969.>	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a OTHER INCOME			03	39,964.	
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		56,367.	0.
105 Total (add line 104, columns (B), (D), and (E))					56,367.

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).
▼	

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, to
 - (b) Did the organization, during the year, pay premiums, directly or indirectly, on a
- Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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.

Please Sign Here
 Signature of officer: *[Signature]* Date: 12/11

Paid Preparer's Use Only
 Preparer's signature: *[Signature]*
 Firm's name (or yours if self-employed), address, and ZIP + 4: HENSIEK & CARON, CPA'S
 65 N. RAYMOND, STE 240
 PASADENA, CA 91103

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No 1545-0047

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

2002

Department of the Treasury
Internal Revenue Service

Supplementary Information-(See separate instructions.)

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

Name of the organization **THE AYN RAND INSTITUTE, THE CENTER FOR
THE ADVANCEMENT OF OBJECTIVISM** Employer identification number **22 2570926**

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
<u>YARON BROOK</u> ----- 2121 ALTON PKWY, SUITE 250, IRVINE CAVARIES	EXE DIRECTOR	199,284.		
<u>MARK CHAPMAN</u> ----- 2121 ALTON PKWY, SUITE 250, IRVINE CAVARIES	VP DEVELOPMEN	129,500.		
<u>KATHERINE CROSS</u> ----- 2121 ALTON PKWY, SUITE 250, IRVINE CAVARIES	OFFICER	75,919.		
<u>DUANE KNIGHT</u> ----- 2121 ALTON PKWY, SUITE 250, IRVINE CAVARIES	GIFT MANAGER	81,194.		
<u>JULIE REPASS</u> ----- 2121 ALTON PKWY, SUITE 250, IRVINE CAVARIES	SEC / TRES	83,975.		
Total number of other employees paid over \$50,000 ▶	0			

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
<u>WESTAMERICA GRAPHICS</u> ----- 19682 DESCARTES, FOOTHILL RANCH, CA 92610	PRINTERS	173,072.
----- ----- ----- ----- ----- ----- ----- ----- ----- -----		
Total number of others receiving over \$50,000 for professional services ▶	0	

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

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.) SEE STATEMENT 9		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?	X	
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?		X
e Transfer of any part of its income or assets?		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)	X	
4 Do you have a section 403(b) annuity plan for your employees?		X
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. SEE STATEMENT 10		

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.)

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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.)	3,042,872.	2,494,680.	2,795,783.	1,912,867.	10,246,202.
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	2,255.	15,445.	11,103.	15,424.	44,227.
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	32,616.	28,222.	SEE STATEMENT 11 7,912.	<36,070.>	32,680.
23 Total of lines 15 through 22	3,077,743.	2,538,347.	2,814,798.	1,892,221.	10,323,109.
24 Line 23 minus line 17	3,077,743.	2,538,347.	2,814,798.	1,892,221.	10,323,109.
25 Enter 1% of line 23	30,777.	25,383.	28,148.	18,922.	
26 Organizations described on lines 10 or 11:					
a Enter 2% of amount in column (e), line 24					206,462.
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					3,315,318.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					10,323,109.
d Add: Amounts from column (e) for lines:					
18 <u>44,227.</u>					
22 <u>32,680.</u>					
19 _____					
26b <u>3,315,318.</u>					
e Public support (line 26c minus line 26d total)					6,930,884.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					67.1395%
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 _____					
17 _____					
20 _____					
21 _____					
d Add: Line 27a total _____ and line 27b total _____					
e Public support (line 27c total minus line 27d total)					N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					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.					

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?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	32d	

33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	33h	

34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 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	41	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

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

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

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

Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.) **N/A**

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

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

FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 1

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
SALE OF INVESTMENTS	130,731.	139,700.	0.	<8,969.>
TO FORM 990, PART I, LINE 8	130,731.	139,700.	0.	<8,969.>

FORM 990 OTHER EXPENSES STATEMENT 2

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
ADVERTISING AND PROMOTION	151,418.	143,841.	798.	6,779.
AUDIOVISUAL	11,650.	1,042.	7,741.	2,867.
BANK CHARGES	51,111.	3,763.	29,615.	17,733.
CLERICAL SERVICES	5,291.	5,291.		
EVENTS	41,983.	24,812.	10,337.	6,834.
INSURANCE	8,480.		8,480.	
LIBRARY	62,182.	53,824.	5,259.	3,099.
LIST RENTAL	31,320.	28,735.		2,585.
OTHER	<693.>	157.	<46.>	<804.>
OUTSIDE SERVICES	395,753.	229,057.	61,368.	105,328.
PRIZES, GRANTS AND SCHOLARSHIPS	242,239.	242,239.		
TRANSPORTATION	2,938.	2,093.	436.	409.
TAXES AND LICENSES	5,241.	4,000.	1,241.	
PAYROLL TAXES AND FRINGE BENEFITS	245,530.	126,752.	50,464.	68,314.
EDITING	13,730.	13,730.		
TOTAL TO FM 990, LN 43	1,268,173.	879,336.	175,693.	213,144.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 3
PART III

EXPLANATION

THE CENTER WAS ESTABLISHED FOR THE ADVANCEMENT OF AYN RAND'S PHILOSOPHY, OBJECTIVISM.

FORM 990 OTHER PROGRAM SERVICES STATEMENT 4

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
NEWSLETTER DEPARTMENT		5,039.
INTERNET/IT		73,767.
BOOK PROMOTION & PUBLICATION		108,386.
PROFESSIONAL OUTREACH		58,181.
PUBLIC OUTREACH		398,508.
TOTAL TO FORM 990, PART III, LINE E		643,881.

FORM 990 NON-GOVERNMENT SECURITIES STATEMENT 5

SECURITY DESCRIPTION	CORPORATE STOCKS	CORPORATE BONDS	OTHER PUBLICLY TRADED SECURITIES	OTHER SECURITIES	TOTAL NON-GOV'T SECURITIES
MUTUAL FUND			861,234.		861,234.
TO 990, LN 54 COL B			861,234.		861,234.

FORM 990 OTHER ASSETS STATEMENT 6

DESCRIPTION	AMOUNT
DEPOSITS	129,570.
INVESTMENT IN SUBSIDIARY	165,000.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	294,570.

FORM 990 OTHER LIABILITIES STATEMENT 7

DESCRIPTION	AMOUNT
GIFT ANNUITY OBLIGATIONS	750,872.
DEFERRED REVENUE - POOLED INCOME FUND	29,601.
LINE OF CREDIT	215,000.
NOTES PAYABLE	155,880.
TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B	1,151,353.

FORM 990

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

STATEMENT 8

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MICHAEL BERLINER 2121 ALTON PKWY, STE 250 IRVINE, CA 92606	DIRECTOR VARIES	0.	0.	0.
HARRY BINSWANGER 2121 ALTON PKWY, STE 250 IRVINE, CA 92606	DIRECTOR VARIES	0.	0.	0.
PETER SCHWARTZ 2121 ALTON PKWY, STE 250 IRVINE, CA 92606	CHAIRMAN VARIES	0.	0.	0.
ARLINE MANN 2121 ALTON PKWY, STE 250 IRVINE, CA 92606	DIRECTOR VARIES	0.	0.	0.
JOHN RIDPATH 2121 ALTON PKWY, STE 250 IRVINE, CA 92606	DIRECTOR VARIES	0.	0.	0.
PETER LEPORT, M.D. 2121 ALTON PKWY, STE 250 IRVINE, CA 92606	DIRECTOR VARIES	0.	0.	0.
JULIE REPASS 2121 ALTON PKWY, STE 250 IRVINE, CA 92606	OFFICER/TREASURER VARIES	83,974.	0.	0.
CARL BARNEY 2121 ALTON PKWY, STE 250 IRVINE, CA 92606	DIRECTOR VARIES	0.	0.	0.
YARON BROOK 2121 ALTON PKWY, STE 250 IRVINE, CA 92606	EXECUTIVE DIRECTOR VARIES	199,284.	0.	0.
MARK CHAPMAN 2121 ALTON PKWY, STE 250 IRVINE, CA 92606	VP DEVEOLPMENT VARIES	129,500.	0.	0.
KATHERINE CROSS 2121 ALTON PKWY, STE 250 IRVINE, CA 92606	OFFICER VARIES	75,918.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V		488,676.	0.	0.

SCHEDULE A STATEMENT REGARDING ACTIVITIES WITH SUBSTANTIAL CONTRIBUTORS, TRUSTEES, DIRECTORS, CREATORS, KEY EMPLOYEES, ETC., PART III, LINE 2 STATEMENT 9

HARRY BINSWANGER, OWNER OF THE OBJECTIVIST FORUM PUBLICATIONS, INC., TEACHES AT THE OBJECTIVIST ACADEMIC CENTER. PETER SCHWARTZ, OWNER OF PETER SCHWARTZ INC., PROVIDES OPINION/EDITORIAL SERVICES TO ARI'S MEDIA DEPARTMENT.

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS PART III, LINE 3 STATEMENT 10

APPLICANTS MUST MEET ALL QUALIFYING TERMS AS OUTLINED IN OUR STRATEGIC PLAN. AWARDS WILL BE GIVEN AS DETERMINED BY ARI'S GRANT COMMITTEE ON A CASE BY CASE BASIS. THIS IS BASED UPON FORMAL GRANT APPLICATIONS ACCOMPANIED BY ABSTRACTS, COMPLETION OUTLINES AND SCHEDULES, DRAFTS AND WILLINGNESS TO UNDERGO PERIODIC EVALUATIONS BY ARI OR ITS APPOINTEE, AND SUBJECT TO ARI'S APPROVAL TERMS.

SCHEDULE A OTHER INCOME STATEMENT 11

DESCRIPTION	2001 AMOUNT	2000 AMOUNT	1999 AMOUNT	1998 AMOUNT
BOOK SALES & MISC	32,616.	28,222.	7,912.	<36,070.>
TOTAL TO SCHEDULE A, LINE 22	32,616.	28,222.	7,912.	<36,070.>