

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)

2001

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 2001 calendar year, or tax year beginning 2001, and ending 20

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

Please use IRS label or print or type See Specific Instructions

C Name of organization, number and street, city, town, state, and ZIP code: National Space Society, 600 Pennsylvania Avenue SE 201, Washington DC 20003-4344

D Employer identification number: 23-7417411; E Telephone number: 202-543-1900; F Acctg method: Cash [], Accrual [X], Other (specify) []

G Web site

J Organization type (check only one): [X] 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

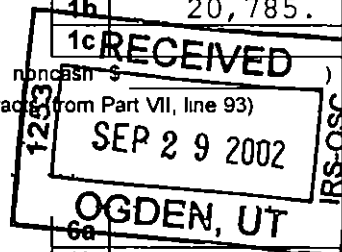
H & I are not applicable to section 527 organizations; H(a) is this a group return for affiliates? [] Yes [X] No; H(b) if "Yes" enter number of affiliates; H(c) Are all affiliates included? [] Yes [] No; H(d) is this a separate return filed by an organization covered by a group ruling? [X] Yes [] No

L Gross receipts Add lines 6b, 8b, 9b and 10b to line 12: 892,732.

I Enter 4-digit GEN: 3352; M Check [] if 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 (See Specific Instructions)

Table with columns for line number, description, and amount. Includes rows for contributions (1), program service revenue (2), membership dues (3), interest on savings (4), dividends (5), gross rents (6a-6c), other investment income (7), gross amount from sales of assets (8a-8d), special events (9), gross sales of inventory (10a-10c), other revenue (11), program services (13-15), and total expenses (17). Total revenue (12) is 892,467. Net assets at end of year (21) is 570,566.



SCANNED OCT 07 2002

MCMZMCMR

EXPENSES

ASSETS

8

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 (See Specific Instructions)

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 \$ _____)	22			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc	25 110000.	79695.	24948.	5357.
26 Other salaries and wages	26 235946.	171174.	53306.	11466.
27 Pension plan contributions	27			
28 Other employee benefits	28			
29 Payroll taxes	29			
30 Professional fundraising fees	30			
31 Accounting fees	31			
32 Legal fees	32			
33 Supplies	33 5484.	139.	5345.	
34 Telephone	34 9028.	903.	8125.	
35 Postage and shipping	35			
36 Occupancy	36			
37 Equipment rental and maintenance	37 5044.		5044.	
38 Printing and publications	38			
39 Travel	39 10279.	8944.	1333.	2.
40 Conferences, conventions, and meetings	40			
41 Interest	41			
42 Depreciation, depletion, etc (attach schedule)	42 7495.		7495.	
43 Other expenses not covered above (itemize) a _____	43a			
b Schedule	43b 906443.	731906.	23045.	151492.
c	43c			
d	43d			
e	43e			
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 1289719.	992761.	128641.	168317.

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) 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 (See Specific Instructions)

What is the organization's primary exempt purpose? <input checked="" type="checkbox"/> Education-outer space	Program Service Expenses (Required for 501(c)(3) & (4) orgs & 4947(a)(1) trusts but optional for others)
a Education and Communication see attached (Grants and allocations \$ _____)	642577.
b Policy & Research see attached (Grants and allocations \$ _____)	350184.
c (Grants and allocations \$ _____)	
d (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B) Program services)	992761.

Part IV Balance Sheets (See Specific Instructions)

Note		Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A) Beginning of year		(B) End of year
ASSETS	45	Cash -- non-interest-bearing		794,043.	45	123,649.
	46	Savings and temporary cash investments		10,810.	46	12,067.
	47a	Accounts receivable	47a			
	b	Less allowance for doubtful accounts	47b		47c	
	48a	Pledges receivable	48a	30,502.		
	b	Less allowance for doubtful accounts	48b		48c	30,502.
	49	Grants receivable			49	
	50	Receivables from officers, directors, trustees and key employees (attach schedule)			50	
	51a	Other notes and loans receivable (attach schedule)	51a			
	b	Less allowance for doubtful accounts	51b		51c	
	52	Inventories for sale or use			52	
	53	Prepaid expenses and deferred charges		11,223.	53	4,480.
	54	Investments -- securities (attach schedule) ▶ <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		258,022.	54	564,137.
	55a	Investments -- land, buildings, and equipment basis	55a	48,686.		
b	Less accumulated depreciation (attach schedule)	55b	24,772.	29,131.	55c	23,914.
56	Investments -- other (attach schedule)			56		
57a	Land buildings and equipment basis	57a				
b	Less accumulated depreciation (attach schedule)	57b			57c	
58	Other assets (describe ▶ _____)			58		
59	Total assets (add lines 45 through 58) (must equal line 74)			1,125,069.	59	758,749.
LIABILITIES	60	Accounts payable and accrued expenses		33,246.	60	46,125.
	61	Grants payable			61	
	62	Deferred revenue		124,005.	62	142,058.
	63	Loans from officers, directors, trustees and key employees (attach schedule)			63	
	64a	Tax-exempt bond liabilities (attach schedule)			64a	
	b	Mortgages and other notes payable (attach schedule)			64b	
	65	Other liabilities (describe ▶ _____)			65	
66	Total liabilities (add lines 60 through 65)			157,251.	66	188,183.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted		935,168.	67	527,997.
	68	Temporarily restricted		32,650.	68	42,569.
	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)			967,818.	73	570,566.
74	Total liabilities and net assets / fund balances (add lines 66 and 73)			1,125,069.	74	758,749.

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

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

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

a Total revenue, gains, and other support per audited financial statements	a	892467.
b Amounts included on line a but not on line 12, Form 990		
(1) Net unrealized gains on investments \$		
(2) Donated services & use of facilities \$		
(3) Recoveries of prior year grants \$		
(4) Other (specify)		
Add amounts on lines (1) through (4)	b	
c Line a minus line b	c	892467.
d Amounts included on line 12, Form 990 but not on line a		
(1) Investment expenses not included on line 6b, Form 990 \$		
(2) Other (specify)		
Add amounts on lines (1) and (2)	d	
e Total revenue per line 12, Form 990 (line c plus line d)	e	892467.

a Total expenses and losses per audited financial statements	a	1289719.
b Amounts included on line a but not on line 17 Form 990		
(1) Donated services & use of facilities \$		
(2) Prior year adjustments reported on line 20, Form 990 \$		
(3) Losses reported on line 20, Form 990 \$		
(4) Other (specify)		
Add amounts on lines (1) through (4)	b	
c Line a minus line b	c	1289719.
d Amounts included on line 17, Form 990 but not on line a		
(1) Investment expenses not included on line 6b, Form 990 \$		
(2) Other (specify)		
Add amounts on lines (1) and (2)	d	
e Total expenses per line 17, Form 990 (line c plus line d)	e	1289719.

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

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred comp	(E) Expense account and other allowances
Patricia A Dash 560 N Street Wash DC	Exec. Dir. 50	110,000.	0	0
Board of Directors See Attached Sch	Volunteer	0	0	0
Executive Committee See Attached Sch	Volunteer	0	0	0

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

Part VI Other Information (See Specific Instructions)		Yes	No
76	Did organization engage in any activity not previously reported to IRS? If "Yes" attach 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
78a	Did the organization have unrelated business gross income of \$1 000 or more during the year covered by this return?	X	
78b	b If "Yes," has it filed a tax return on Form 990-T for this year?	X	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80a	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
81a	b If "Yes" enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
81a	Enter direct or indirect political expenditures See line 81 instructions		
81b	b Did the organization file Form 1120-POL for this year?		X
82a	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
82b	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)		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83b	b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
84b	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85a	501(c)(4), (5) or (6) organizations a Were substantially all dues nondeductible by members?		
85b	b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		
85c	c Dues, assessments, and similar amounts from members		
85d	d Section 162(e) lobbying and political expenditures		
85e	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
85f	f Taxable amount of lobbying and political expenditures (line 85d less 85e)		
85g	g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
85h	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?		
86a	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12		
86b	b Gross receipts, included on line 12, for public use of club facilities		
87a	501(c)(12) orgs Enter a Gross income from members or shareholders		
87b	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
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
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 _____, section 4912 _____, section 4955 _____		
89b	b 501(c)(3) and 501(c)(4) orgs 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
89c	c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
89d	d Enter Amount of tax on line 89c, above, reimbursed by the organization		
90a	List the states with which a copy of this return is filed _____		
90b	b Number of employees employed in the pay period that includes March 12, 2001 (See instructions)	7	
91	The books are in care of _____ Treasurer Telephone no _____ 202-543-1900 Located at _____ 600 Penna. Ave. 201, Washington, DC ZIP + 4 _____ 20003		
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 _____		

Part VII Analysis of Income-Producing Activities (See Specific 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	
Note Enter gross amounts unless otherwise indicated					
93 Program service revenue					
a Conference					32,686.
b Other programs					11,564.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from govt agencies					
94 Membership dues & assessments					584,800.
95 Interest on savings and temporary cash investments			514	29,597.	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			514	(104,215.)	
101 Net income or (loss) from special events					
102 Gross profit/(loss) from sales of inventory					3,269.
103 Other revenue a					
b List Rental	9400	1,148.			
c Royalties			515	4,485.	
d					
e					
104 Subtotal (add columns (B), (D), and (E))		1,148.		(70,133.)	632,319.
105 Total (add line 104, columns (B), (D), and (E))					563,334.

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 Specific Instructions)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93A&B	Conferences & events for futherance of members education to promote space exploration.
94	Publication of bi-monthly magazine to educate & disseminate information & data about outer space.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions)

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

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions)

(a) Did organization, during year, receive any funds directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums directly or indirectly, on a personal benefit contract? Yes No

Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

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

Date 9-25-2002
 [Signature] Chairman, Executive Committee

Part III Statements About Activities (See 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 amount 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	1		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)			
a Sale, exchange or leasing of property?	2a		X
b Lending of money or other extension of credit?	2b		X
c Furnishing of goods, services, or facilities?	2c		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		X
e Transfer of any part of its income or assets?	2e		X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below)	3		X
4 Do you have a section 403(b) annuity plan for your employees?	4		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			

Part IV Reason for Non-Private Foundation Status (See the instructions)		Yes	No
The organization is not a private foundation because it is (Please check only ONE applicable box)			
5 <input type="checkbox"/> A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)			
6 <input type="checkbox"/> A school Section 170(b)(1)(A)(ii) (Also complete Part V)			
7 <input type="checkbox"/> A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)			
8 <input type="checkbox"/> A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)			
9 <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input checked="" type="checkbox"/> 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 <input type="checkbox"/> A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
12 <input type="checkbox"/> 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 <input type="checkbox"/> 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 the instructions)			
(a) Name(s) of supported organization(s)		(b) Line number from above	

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) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	1,036,821.	361,935.	564,273.	412,614.	2,375,643.
16 Membership fees received	657,482.	809,126.	571,605.	680,326.	2,718,539.
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	297,945.	168,025.	84,213.	92,743.	642,926.
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	16,435.	27,093.	61,881.	54,440.	159,849.
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.					
23 Total of lines 15 through 22	2,008,683.	1,366,179.	1,281,972.	1,240,123.	5,896,957.
24 Line 23 minus line 17	1,710,738.	1,198,154.	1,197,759.	1,147,380.	5,254,031.
25 Enter 1% of line 23	20,087.	13,662.	12,820.	12,401.	
26 Organizations described on lines 10 or 11	<p>a Enter 2% of amount in column (e), line 24</p> <p>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 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.</p> <p>c Total support for section 509(a)(1) test. Enter line 24, column (e).</p> <p>d Add: Amounts from column (e) for lines 18 159,849. 19 _____ 22 _____ 26b _____</p> <p>e Public support (line 26c minus line 26d total)</p> <p>f Public support percentage (line 26e (numerator) divided by line 26c (denominator))</p>				<p>26a 105,081.</p> <p>26b _____</p> <p>26c 5,254,031.</p> <p>26d 159,849.</p> <p>26e 5,094,182.</p> <p>26f 96.96 %</p>
27 Organizations described on line 12	<p>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:</p> <p>(2000) _____ (1999) _____ (1998) _____ (1997) _____</p> <p>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:</p> <p>(2000) _____ (1999) _____ (1998) _____ (1997) _____</p> <p>c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____</p> <p>d Add: Line 27a total _____ and line 27b total _____</p> <p>e Public support (line 27c total minus line 27d total)</p> <p>f Total support for section 509(a)(2) test. Enter amount from line 23, column (e) 27f _____</p> <p>g Public support percentage (line 27e (numerator) divided by line 27f (denominator))</p> <p>h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))</p>				<p>27c _____</p> <p>27d _____</p> <p>27e _____</p> <p>27g _____ %</p> <p>27h _____ %</p>
28 Unusual Grants	<p>For an organization described in line 10, 11 or 12 that received any unusual grants during 1997 through 2000, 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.</p>				

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

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

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
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		1,289,719.
40 Total exempt purpose expenditures (add lines 38 and 39)	40		1,289,719.
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	203,972.
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		50,993.
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)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities
 (For reporting only by organizations that did not complete Part VI-A) (See 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	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)			

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

Name of organization
National Space Society

Employer identification number
23-7417411

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

- Disclosable for**
- ▶ **Section 527 organizations that file Form 990 or 990-EZ**
 - ▶ **Organizations that file Form 990-PF**
- Nondisclosable for**
- ▶ **Organizations that file Form 990 or 990-EZ except for section 527 organizations (see above)**

Organization type (check one)

- | Filers of | Section |
|--------------------|--|
| Form 990 or 990-EZ | <input checked="" type="checkbox"/> 501 (c)(3) (enter number) organization |
| | <input type="checkbox"/> 4947 (a) (1) nonexempt charitable trust not treated as a private foundation |
| | <input type="checkbox"/> 527 political organization |
| Form 990-PF | <input type="checkbox"/> 501 (c) (3) private foundation |
| | <input type="checkbox"/> 4947 (a) (1) trust treated as a private foundation |

Check if your organization is covered by the General rule or a Special rule (Note Only a section 501 (c) (7) (8) or (10) organization can check box(es) for both the General rule and a Special rule - see instructions)

General Rule -

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

Special Rules -

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

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

For Privacy Act and Paperwork Reduction Act Notice, see instructions

Name of organization National Space Society	Employer identification number 23-7417411
---	---

Part I Contributors

(a) No	(b) Name, address and zip code	(c) Aggregate contributions	(d) Type of contribution
1		\$ <u>35,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
2		\$ <u>31,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
3		\$ <u>17,200.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)

US 990

Investments - Securities: Page 3, Line 54

2001

Description	Cost	Market Value
Marketable equity securities plus bonds		564,137. 564,137.

NATIONAL SPACE SOCIETY
#23-7417411
Form 990

Page 2, Part III - Description of exempt purpose activities:

- a. Education and Communication:**
Space related education and communication for the approximately 25,000 members through regional meetings, topical workshops, and publications of magazine (ADASTRA).
- b. Research Policy:**
Space related research and policy dissemination to approximately 25,000 members and the general public through seminars, publications and the media

National Space Society

Executive Committee and Board of Directors

Title (if any)	First Name	Last Name	Street Address	City	State	Mail Code	Nation
President	Dan	Brandenstein	Lockheed Martin Space Operations P O Box 57487	Houston	TX	77258	
Chairman, Executive Committee	Kirby	Ikin	1 Tregenna Close	St Ives	NSW	2076	Australia
Chairman, Board of Governors	Hugh	Downs	7993 N Ridgeview Drive #4	Paradise Valley	AZ	85253-3088	
Executive Vice President	Gordon	Woodcock	1709 Willowbrook Drive	Huntsville	AL	35802-3934	
Senior Vice President	Jeffrey	Liss	1384 Edgewood Lane	Winnetka	IL	60093-1412	
Vice President of Fundraising	Greg	Rucker	4281 Coventry Green Circle	Williamsville	NY	14221	
Vice President of Chapters	Greg	Allison	PMB 188, 1019 Old Monrovia Road	Huntsville	AL	35806	
Vice President of Membership	Jay	Wittner	902 138th Street E	Bradenton	FL	34202	
Vice President of Public Affairs	Christopher M	Pancratz	2803 Noble Fir Court	Woodbridge	VA	22192	
Treasurer	Joe	Redfield	809 Ridge View	San Antonio	TX	78253	
Secretary	Sharon	Elbert	2914 E Bending Creek Trail	Crete	IL	60417-3855	
Assistant Secretary	Bob	Gounley	293 East Ohio Street, #1	Pasadena	CA	91108-4287	
Assistant Treasurer	Joseph M.	Ausmann	6816 W Church Street	Morton Grove	IL	60053	
General Counsel (ex-officio)	Ken	Schwetje	1687 K St. NW, Suite 801	Washington	DC	20008	
Executive Director (ex-officio)	Pat	Dasch	800 Pennsylvania Ave SE, Ste 201	Washington	DC	20003-2140	
	Laurence	Ahearn	810 W 47th Place	Chicago	IL	60609	
	Murray	Clark	12637 Clark Lane	Conroe	TX	77385-5333	
	Marlaine J	Dyson	15443 Runswick Drive	Houston	TX	77082-3310	
	Michael	Gilbrook	7835 Horse Ferry Road	Orlando	FL	32835	
	Francis X	Govers	24838 Baywick Drive	Spring	TX	77389	
	Mark	Hopkins	2439 25th Street	Santa Monica	CA	90405-1818	
	Dana	Johnson	4398 Eaton Place	Alexandria	VA	22310	
	Ronnie	Lajole	162 Kirby Lane	Madison	AL	35757	
	Brian	Lundquist	18300 NW Green Mountain Rd	Banks	OR	97108	
	Bruce	Mackenzle	102 Sanborn Lane	Reading	MA	01867-1009	
	Tim	McEgan	PO Box 18, Grosvenor Place	Sydney	NSW	1220	Australia
	Clifford	McMurray	Luisental 29c, app 8022	28359 Bremen			Germany
	Stewart	Nozette	141 Grafton Street	Chevy Chase	MD	20815	
	Robert	Pearlman	11332 Evans Trail, #201	Beltsville	MD	20705	
	Karen	Savage	1092 Flume Road	Incline Village	NV	89451-9308	
	Charles	Walker	1200 Wilson Boulevard	Arlington	VA	22209	
	Alan	Wasser	404 Riverside Drive, Apt. 3N	New York	NY	10025	
	Wayne	White	4485 Kipling Street, #200	Wheat Ridge	CO	80033	
	S Pete	Worden	489 Selfridge Drive	Colorado Springs	CO	80910	
	Phillip	Young	158 Murray Farm Road	Beecroft	NSW	2119	Australia
	Robert	Zubrin	4446 Parmalee Gulch	Indian Hills	CO	80454	

NATIONAL SPACE SOCIETY
STATEMENT OF FUNCTIONAL EXPENSES
For the Years Ended December 31, 2001

	Total	Program	Management and General	Fundraising
Accommodations/meals	10,045	8,118	1,927	
Authors and Artwork	6,659	6,659	-	
Bank charges	811	0	811	-
Computer Services	42,457	31,392	11,065	-
Contract services	244,253	170,541	58,708	15,006
Copy Services	2,325	0	2,325	-
Couner	453	297	119	37
Credit card fees	6,710	413	6,297	
Data Entry	25,367	16,661	-	8,706
Dues and subscriptions	3,390	1,783	1,592	15
Delivery	3,183	1,175	1,927	61
Education and Training	14,600	14,600	0	-
Facility	66,950	45,248	18,664	3,038
General and Administrative	0	102,701	(109,543)	6,842
Insurance	6,822	250	6,572	
List Rental	16,802	0	16,802	-
Mailing Services	178,813	85,197	-	93,616
Press/public relations	941	714	227	-
Postage	109,861	88,762	4,604	16,495
Printed Material	23,294	23,294	-	-
Printing	110,638	101,887	1,075	7,676
Registration conferences	32,289	32,214	75	
	<u>906,443</u>	<u>731,906</u>	<u>23,045</u>	<u>151,492</u>

*General and administrative is only detailed in the Management and General column

Application for Extension of Time to File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
 - If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form).
- Note: Do not complete Part II unless you have already been granted an automatic 3-month extension of a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time- Only submit original (no copies needed)

Note: Forms 990-T corporations requesting an automatic 6-month extension- check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8738 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print	Name of Exempt Organization National Space Society	Employer identification number 23-7417411
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 600 Pennsylvania Avenue SE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Washington DC 20003-4344	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 6870 |

- If the organization does not have an office or place of business in the United States, check this box
- If this is for Group Return, enter the organization's four digit Group Exemption Number (GEN) 3352. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until 11/15/2002 to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ calendar year 20 01 or

▶ tax year beginning _____, 20 _____ and ending _____, 20 _____

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions _____ \$ _____

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit _____ \$ _____

c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions _____ \$ _____

Signature and Verification

Under penalties of perjury I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ D. Gay Sigler Title ▶ CPA Date ▶ 8/10/02

Application for Extension of Time to File an Exempt Organization Return

OMB No 1545 1709

▶ File a separate application for each return

- If you are filing for an **Automatic 3- Month Extension**, complete only **Part I** and check this box
 - If you are filing for an **Additional (not automatic) 3- Month Extension**, complete only **Part II** (on page 2 of this form)
- Note** Do not complete **Part II** unless you have already been granted an automatic 3- month extension of a previously filed Form 8868

Part I Automatic 3- Month Extension of Time- Only submit original (no copies needed)

Note Form 990- T corporations requesting an automatic 6- month extension- check this box and complete Part I only
 All other corporations (including Form 990- C filers) must use Form 7004 to request an extension of time to file income tax returns Partnerships,
 REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print	Name of Exempt Organization <u>National Space Society</u>	Employer identification number <u>23-7417411</u>
File by the due date for filing your return See instructions	Number, street and room or suite no If a PO box, see instructions <u>600 Pennsylvania Avenue SE</u>	
	City, town or post office state, and ZIP code For a foreign address, see instructions <u>Washington DC 20003-4344</u>	

Check type of return to be filed (file a separate application for each return)

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990- T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990- BL | <input type="checkbox"/> Form 990- T (sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990- EZ | <input type="checkbox"/> Form 990- T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990- PF | <input type="checkbox"/> Form 1041- A | <input type="checkbox"/> Form 8870 |

- If the organization does not have an office or place of business in the United States check this box
- If this is for **Group Return**, enter the organization's four digit Group Exemption Number (GEN) 3352 If this is for the **whole group**, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3- month (6- month, for **990- T corporation**) extension of time until 08/15/2002
 to file the exempt organization return for the organization named above The extension is for the organization's return for
 ▶ calendar year 20 01 or
 ▶ tax year beginning _____, 20 _____ and ending _____, 20 _____

2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Form 990- BL, 990- PF 990- T, 4720, or 6069, enter the tentative tax less any nonrefundable credits See instructios \$ _____

b If this application is for Form 990- PF or 990- T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit \$ _____

c **Balance Due** Subtract line 3b from line 3a Include your payment with this form or if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions \$ _____

Signature and Verification

Under penalties of perjury I declare that I have examined this form including accompanying schedules and statements and to the best of my knowledge and belief it is true correct and complete and that I am authorized to prepare this form

Signature ▶ D. Craig Lighter Title ▶ CPA Date ▶ 5/10/02

For Paperwork Reduction Act Notice, see Instructions

Form **8868** (12-2000)