Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Α	For the	2018 calendar year, or tax year beginning and	d ending	_	
В	Check if applicable	C Name of organization		D Employer identific	cation number
Г	Addres	Atlas Economic Research Foundation			
F	Name change	Doing business as Atlas Network		94-2	763845
F	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
F	Final return/		310	(202	
	termin ated	City or town, state or province, country, and ZIP or foreign postal code	U = U	G Gross receipts \$	15,518,568.
Г	Ameno			H(a) Is this a group re	
F	Applic			for subordinates	
	pendir	same as C above		<b>H(b)</b> Are all subordinates in	
$\overline{\Gamma}$	Tax-exe	empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1	) or 527	7	list. (see instructions)
		e: ► www.atlasnetwork.org	,	H(c) Group exemption	
		organization: X Corporation Trust Association Other	L Year		State of legal domicile: DC
	art I	Summary	<u>'</u>	'	
	1	Briefly describe the organization's mission or most significant activities: $\mathtt{Atla}$	as Netw	ork increas	es
Activities & Governance		opportunity and prosperity by strengther	ning a	global netw	ork of
rna	2	Check this box  if the organization discontinued its operations or disp			
ove	3	-		3	13
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			13
Se	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)			40
/iţi	6	Total number of volunteers (estimate if necessary)			10
cţi	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
٩	b	Net unrelated business taxable income from Form 990-T, line 38			23,099.
				Prior Year	Current Year
Ф	8	Contributions and grants (Part VIII, line 1h)		9,994,567.	15,319,187.
'n		Program service revenue (Part VIII, line 2g)		117,368.	85,062.
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		18,879.	55,469.
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		250.	58,850.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		10,131,064.	15,518,568.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		5,295,900.	4,987,452.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10	)	3,136,238.	3,255,942.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		96,817.	0.
xpe	b	Total fundraising expenses (Part IX, column (D), line 25)   1,446,1	168. 🗀		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,370,737.	3,595,036.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		11,899,692.	11,838,430.
	19	Revenue less expenses. Subtract line 18 from line 12		-1,768,628.	3,680,138.
Net Assets or			Ве	eginning of Current Year	End of Year
Sets	20	Total assets (Part X, line 16)		7,482,522.	11,741,307.
t As	21	Total liabilities (Part X, line 26)		1,238,205.	1,818,692.
캺	22	Net assets or fund balances. Subtract line 21 from line 20		6,244,317.	9,922,615.
P	art II	Signature Block			
		lties of perjury, I declare that I have examined this return, including accompanying schedu		-	knowledge and belief, it is
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of	which preparer	-	
		Signature of officer		Date	9-2019
Sig				Date	
He	re	Bradley A. Lips, CEO Type or print name and title			
_			11	Date Check	II PTIN
Da!	,	Print/Type preparer's name  Preparer's signature  Preparer's signature		OHOOK	<b>-</b>
Pai		Nicole M. Prince, CPA	ine (	05/08/19 if self-employe	P01315245 58-2676261
		Firm's name Rogers & Company Plic		Firm's EIN	70-70/0707
US	Only	Firm's address 8300 Boone Boulevard, Suite 600 Vienna, VA 22182	J	Diam / 7	03) 893-0300
N 4 -	ا علين	RS discuss this return with the preparer shown above? (see instructions)		Phone no. (7	X Yes No
IVIA	v me it	no giacuas mis return with the preparer shown above? (see instructions)			144 TES   INO

Pa	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Atlas Network increases opportunity and prosperity by strengthening a
	global network of independent civil society organizations that promote
	individual freedom and remove barriers to human flourishing.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 1,181,312 • including grants of \$ 357,530 • ) (Revenue \$ 9,500 • )
	COACH - Atlas Network provides world-class training and mentoring to
	inspire professionalism and improve performance among its independent
	partners.
4b	(Code:) (Expenses \$6,530,500 • including grants of \$4,565,596 • ) (Revenue \$8,325 • )
	COMPETE - Atlas Network offers grant and prize competitions that fuel
	its partners efforts to achieve extraordinary outcomes.
	2 050 201
4c	(Code: ) (Expenses \$ 2,059,201. including grants of \$ 64,326.) (Revenue \$ 67,237.)
	CELEBRATE - Atlas Network fosters camaraderie and stokes ambitions
	among its partners by celebrating their greatest accomplishments
	through its events and media outreach.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ▶ 9,771,013.
	Form <b>990</b> (2018)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
_	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?  If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Λ	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			.,
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	. 10		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

	n 990 (2018) Atlas Economic Research Foundation 94-2/6 rt IV   Checklist of Required Schedules (continued)	3845	) F	age 4
ı u	Officorrior of Frequired Containaed)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	. 22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	. 23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			١,,
	Schedule K. If "No," go to line 25a			X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	. 24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?			$\vdash$
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	. 24d	+	$\vdash$
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	. 25a	1	<del>  ^</del>
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	OEh		x
26		. 25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
		26		x
27	complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	.   20		<del> </del>
LI	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	·		
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	. —		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	. 30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	. 31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	. 32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	. 33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			l
	Part V, line 1			X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	. 35a	<u> </u>	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			₩
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			٠,
	If "Yes," complete Schedule R, Part V, line 2	. 36	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<sub>v</sub>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	. 37	-	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		х	
Pa	Note. All Form 990 filers are required to complete Schedule O	.   38	A	<u> — </u>
Га	Check if Schedule O contains a response or note to any line in this Part V			
	Officer if Schedule O Contains a response of flote to any line in this fact v	<u></u>		L No
4.	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	7	Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	<b>–</b>		
·	(gambling) winnings to prize winners?	. 1c	х	

(gambling) winnings to prize winners?

# Form 990 (2018) Atlas Economic Research Foundation Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 40							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х					
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	X					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X				
b	If "Yes," enter the name of the foreign country: ►							
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			37				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X				
	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?							
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	_		Х				
h	any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a						
Ь		6b						
7	were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).	OD						
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X					
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required							
_	to file Form 8282?	7c		Х				
d	If "Yes," indicate the number of Forms 8282 filed during the year							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х				
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							
g								
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?							
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
	sponsoring organization have excess business holdings at any time during the year?							
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders 11a							
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)							
100	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	ıza						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note. See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans							
С	Enter the amount of reserves on hand 13c							
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or							
	excess parachute payment(s) during the year?	15		Х				
	If "Yes," see instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X				
	If "Yes," complete Form 4720, Schedule O.							

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	tion A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year   1a   13									
	If there are material differences in voting rights among members of the governing body, or if the governing	1								
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.									
h	Enter the number of voting members included in line 1a, above, who are independent 1b 13									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
_	officer, director, trustee, or key employee?	2		х						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
Ü	of officers, directors, or trustees, or key employees to a management company or other person?	3		х						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X						
6										
	Did the organization have members or stockholders?  Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	6		X						
1 a		70		х						
<b>b</b>	more members of the governing body?  Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a								
D		76		х						
0	persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b								
8			Х							
a	The governing body?	8a	X							
	Each committee with authority to act on behalf of the governing body?	8b								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	_		х						
800	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		21						
360	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	Na						
100	Did the examination have lead chanters branches as offiliates?	10a	res	No X						
	Did the organization have local chapters, branches, or affiliates?	IUa		-25						
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
110		11a	Х							
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.	1 Ia								
	and the second s	12a	Х							
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X							
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120	- 25							
C	in Schedule O how this was done	12c	х							
13	Did the organization have a written whistleblower policy?	13	X							
14	Did the organization have a written document retention and destruction policy?	14	X							
		14	25							
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
_		450	Х							
	The organization's CEO, Executive Director, or top management official	15a 15b	X							
D	Other officers or key employees of the organization	130	25							
160	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
IVa		160		х						
h	taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a								
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
		16b								
Sec	exempt status with respect to such arrangements? tion C. Disclosure	100								
17	List the states with which a copy of this Form 990 is required to be filed ►AK , AL , AR , CA , CO , CT , DC , FL , GA	,II,	. KY	, LA						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)									
.0	for public inspection. Indicate how you made these available. Check all that apply.	o orny,	uvalle							
	X Own website Another's website X Upon request Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cial							
19	statements available to the public during the tax year.	ı ııı lal l	cial							
20	State the name, address, and telephone number of the person who possesses the organization's books and records									
20	Bradley A. Lips - (202) 449-8449									
	4075 Wilson Blvd, No. 310, Arlington, VA 22203									

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII ...

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

Learning Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)	ľ			(C)			(D)	(E)	(F)	
Name and Title	Average	(do	Position (do not check more than one				ono	Reportable	Reportable	Estimated	
	hours per	box	oox, unless person is both an officer and a director/trustee)			is bot	h an	compensation	compensation	amount of	
	week	_	-		irecto	or/trus	tee)	from	from related	other	
	(list any hours for	Individual trustee or director						the organization	organizations (W-2/1099-MISC)	compensation from the	
	related	e or d	stee			sated		(W-2/1099-MISC)	(88-2/1099-181130)	organization	
	organizations	truste	al trus		yee	mper		(** = / ********************************		and related	
	below	idual	Institutional trustee	er	Key employee	Highest compensated employee	Je.			organizations	
	line)	Indi	Insti	Officer	Key	High emp	Former				
(1) Linda Whetstone	8.00										
Chairwoman		Х		Х				0.	0.	0.	
(2) Scott Barbee	4.00									•	
Treasurer	1 00	Х		Х				0.	0.	0.	
(3) Debbi Gibbs	4.00	l								•	
Vice Chair	1 00	Х		Х				0.	0.	0.	
(4) Andrea Rich	4.00	l								•	
Board Member	4 00	Х						0.	0.	0.	
(5) Dan Grossman	4.00	,,							0	0	
Board Member	4 00	Х						0.	0.	0.	
(6) Linda Edwards	4.00	,,							0	0	
Board Member	4 00	Х						0.	0.	0.	
(7) Gerry Ohrstrom	4.00	,,							0	0	
Board Member	4 00	Х						0.	0.	0.	
(8) Kathy Washburn	4.00	Х						0.	0.	0	
Board Member	4.00	^						0.	0.	0.	
(9) Lawson Bader	4.00	Х						0.	0.	0.	
Board Member	4.00	^						0.	0.	0.	
(10) Luis Henrique Ball Board Member	4.00	Х						0.	0.	0.	
(11) Nikolaos Monoyios	4.00	^						0.	0.	<u></u>	
Board Member	4.00	X						0.	0.	0.	
(12) Rene Scull	4.00	<u> </u>						0.	0.		
Board Member	4.00	x						0.	0.	0.	
(13) Robert Boyd	4.00								•		
Board Member	1,00	x						0.	0.	0.	
(14) Timothy Browne	4.00										
Board Member		х						0.	0.	0.	
(15) Joe Lehman	4.00								•		
Board Member		х						0.	0.	0.	
(16) Bradley A Lips	40.00										
CEO		1		х				335,832.	0.	36,107.	
(17) Matt Warner	40.00							-		-	
coo		1		Х				240,616.	0.	33,564.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A)	(B)			(C	<b>C</b> )			(D)	(E)		(F)		
Name and title	Average	(do	not c	Posi heck	ition	) than	one	Reportable	Reportable		Es	timate	ed
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	n	an	nount (	of
	week	officer and a director/trustee			Ji/ii us	(ee)	from	from related			other		
	(list any hours for	irecto						the organization	organizations (W-2/1099-MIS			pensa om the	
	related	e or d	stee			sated		(W-2/1099-MISC)	(88-2/1099-18113	,0)		anizati	
	organizations	Individual trustee or director	Institutional trustee		ee/	mpen		(** 27 1000 141100)				d relate	
	below	idual	ution	Je.	Key employee	est co o yee	ь				orga	anizatio	ons
	line)	Indiv	Insti	Officer	Key e	Highest compensated employee	Former						
(18) Tom Palmer	40.00												
Vice-President of International Prog				Х				257,668.		0.	2	5,5	98.
(19) Daniel Anthony	40.00												
VP of Marketing and Communications						Х		160,540.		0.		6,0	91.
(20) Romulo Lopez	40.00												
Director of Finance						Х		118,157.		0.	3	2,3	<u>43.</u>
(21) Stephanie Lips	40.00	1				l		405 006					•
Director of Outreach	40.00					Х		127,236.		0.			0.
(22) Melissa Mann	40.00	1				,,		104 771				- n	0.0
Director of Partnerships	40 00					Х		124,771.		0.		7,2	93.
(23) Lyall Swim	40.00	-				X		117,765.		0.	2	1,5	٥٥
Director of Training						^		117,705.		٠.		<u> </u>	90.
		-											
		1											
		1											
1b Sub-total	ı				<u> </u>	<u> </u>		1,482,585.		0.	16	2,5	86.
c Total from continuation sheets to Part VI								0.		0.			0.
d Total (add lines 1b and 1c)								1,482,585.		0.	16	2,5	86.
2 Total number of individuals (including but n							no r		,000 of reportabl	 e			
compensation from the organization						,							9
-												Yes	No
3 Did the organization list any former officer,	director, or tru	uste	e, ke	y en	nplo	yee	, or	highest compensated e	mployee on				
line 1a? If "Yes," complete Schedule J for s	uch individual										3		X
4 For any individual listed on line 1a, is the su													
and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J i	for such individual			4	Х	
5 Did any person listed on line 1a receive or a					•		elat	ted organization or indivi	dual for services				
rendered to the organization? If "Yes," com	plete Schedul	e J t	or s	uch <sub>I</sub>	pers	son .					5		X
Section B. Independent Contractors													
1 Complete this table for your five highest co										ipens	ation f	rom	
the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	ithir I		/ear.				
<b>(A)</b> Name and business	address	NT	INC					<b>(B)</b> Description of s	ervices	C	(C omper		n
Tvarrie aria basiriess	4441000	147	)INI				$\dashv$	Description of a	CIVIOCO		<del>omper</del>		•
-							$\dashv$					-	
2 Total number of independent contractors (i	•	ot li	mite	d to		_	stec	d above) who received m	ore than				
\$100,000 of compensation from the organi	zation 🕨				(	0							
											Form 9	9 <b>90</b> (2	2018)

		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	( <b>D)</b> Revenue excluded from tax under sections 512 - 514
ts	1 a	Federated campaigns	1a					
iran		Membership dues						
S, G		Fundraising events						
ar/		Related organizations						
s, G		Government grants (contribut						
ion		All other contributions, gifts, gran						
but		similar amounts not included above		15,319,187.				
JĘĘ O	а	Noncash contributions included in lines		51,933.				
Contributions, Gifts, Grants and Other Similar Amounts		Total. Add lines 1a-1f			15,319,187.			
				Business Code	, ,			
ø	2 a	Registrations		900099	85,028.	85,028.		
r ĕ	b	Publications		900099	34.	34.		
Sel	C							
am	d							
Program Service Revenue	e							
Pro		All other program service reve	enue					
		Total. Add lines 2a-2f			85,062.			
	3	Investment income (including			,			
	_	other similar amounts)	•	, , , , , , , , , , , , , , , , , , ,	55,469.			55,469.
	4	Income from investment of tax			,			,
	5	Royalties		·				
	•		(i) Real	(ii) Personal				
	6 a	Gross rents	- (/	(1) 1 11 11 11 11				
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	(,) 555455	(1) 5 11 151				
	b	Less: cost or other basis						
	-	and sales expenses						
	c	Gain or (loss)						
		Net gain or (loss)						
•		Gross income from fundraising						
nue	0 4	including \$	•					
Other Rever		contributions reported on line						
Ŗ		Part IV, line 18						
the	h	Less: direct expenses						
Ó		Net income or (loss) from fund		<b>&gt;</b>				
		Gross income from gaming ac						
	o u	Part IV, line 19						
	h	Less: direct expenses						
		Net income or (loss) from gam						
		Gross sales of inventory, less						
	10 4	and allowances						
	h	Less: cost of goods sold						
		Net income or (loss) from sale						
		Miscellaneous Revenu		Business Code				
	11 a	Refunds/rebates		900099	53,000.			53,000.
		Miscellaneous		900099	5,850.	5,850.		1
	c				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		All other revenue						
		Total. Add lines 11a-11d			58,850.			
	12	Total revenue. See instructions		·····	15,518,568.	90,912.	0	. 108,469.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Charle if Schodule O centains a reason			. ,	
Do	Check if Schedule O contains a respon not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		СХРСПЗСЗ	general expenses	схрензез
•	and domestic governments. See Part IV, line 21	775,498.	775,498.		
2	Grants and other assistance to domestic	,	,		
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	4,211,954.	4,211,954.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	929,385.	535,364.	138,584.	255,437.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	2,043,950.	1,177,399.	304,782.	561,769.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	101,348.	58,381.	15,112.	27,855.
10	Payroll taxes	181,259.	104,413.	27,028.	49,818.
11	Fees for services (non-employees):				
а	Management				
	Legal	22,726.	14,771.	3,015.	4,940.
	Accounting	39,412.	25,616.	5,229.	8,567.
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	113.		113.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	454,405.	275,814.	67,691.	110,900.
12	Advertising and promotion	67,904.	11,186.	2,920.	53,798.
13	Office expenses	612,010.	391,218.	19,062.	201,730.
14	Information technology				
15	Royalties				
16	Occupancy	409,994.	352,575.	17,252.	40,167.
17	Travel	527,303.	498,030.	2,923.	26,350.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,381,425.	1,286,910.	9,437.	85,078.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	23,286.	20,085.	962.	2,239.
23	Insurance	14,372.	8,599.	5,015.	758.
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)	1000	10.555	10.5	6 5 1 2
а	Dues/subscriptions	19,895.	12,657.	496.	6,742.
b	Other	18,561.	8,233.	1,538.	8,790.
С	Bad debt	2,659.	1,692.	66.	901.
d	License/permits	971.	618.	24.	329.
	All other expenses	11 020 420	0 771 010	601 040	1 446 160
25	Total functional expenses. Add lines 1 through 24e	11,838,430.	9,771,013.	621,249.	1,446,168.
26	<b>Joint costs.</b> Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				F 000 (0040)

Pai	πλ	Balance Sneet					
		Check if Schedule O contains a response or not	te to any li	ne in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing		1,633,596.	1	1,455,366.	
	2	Savings and temporary cash investments			2,698,192.	2	2,946,610.
	3	Pledges and grants receivable, net			2,925,973.	3	6,282,843.
	4	Accounts receivable, net		22,212.	4	15,800.	
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensation	ated empl	oyees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	1 4958(c)(3	B)(B), and contributing			
		employers and sponsoring organizations of sec					
छ		employees' beneficiary organizations (see instr).	• •		6		
Assets	7	Notes and loans receivable, net	_		7		
¥	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			128,371.	9	244,203.
	10a	Land, buildings, and equipment: cost or other	I I				
		basis. Complete Part VI of Schedule D	10a	776,137.			
	b	Less: accumulated depreciation		68,472.	48,588.	10c	707,665.
	11	Investments - publicly traded securities	1,811.	11	1,715.		
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14	25,089.		
	15	Other assets. See Part IV, line 11			23,779.	15	62,016.
	16	Total assets. Add lines 1 through 15 (must equ	7,482,522.	16	11,741,307.		
	17	Accounts payable and accrued expenses		289,659.	17	552,011.	
	18	Grants payable		948,546.	18	400,828.	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
S	22	Loans and other payables to current and former					
≝		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate		_		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	s 17-24). C	omplete Part X of			
		Schedule D			0.	25	865,853.
	26	<b>—</b>			1,238,205.	26	1,818,692.
		Organizations that follow SFAS 117 (ASC 958	3), check h	nere X and			
Se		complete lines 27 through 29, and lines 33 an					
ũ	27	Unrestricted net assets			722,933.	27	1,384,183.
3ale	28	Temporarily restricted net assets			5,521,384.	28	8,538,432.
βE	29	D		<u></u>		29	
Ξ		Organizations that do not follow SFAS 117 (A	SC 958), (	check here			
ō		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
155	31	Paid-in or capital surplus, or land, building, or ed	quipment f	und		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come, or	other funds		32	
Z	33	Total net assets or fund balances			6,244,317.	33	9,922,615.
	34	Total liabilities and net assets/fund balances	7,482,522.	34	11,741,307.		

Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)		15,51					
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,83	8,4	30.			
3	Revenue less expenses. Subtract line 2 from line 1	3	3,68	0,1	38.			
4								
5								
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,							
	column (B))	10	9,92	2,6	15.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII							
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	Х				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,						
	consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit						
	Act and OMB Circular A-133?		3a		<u>X</u>			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit						
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b					

Form **990** (2018)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** Name of the organization Atlas Economic Research Foundation 94-2763845 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 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 exempt 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). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	9,313,501.	11,333,100.	14,659,146.	9,994,567.	15,319,187.	60,619,501.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	9,313,501.	11,333,100.	14,659,146.	9,994,567.	15,319,187.	60,619,501.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						19,943,290.
	Public support. Subtract line 5 from line 4.						40,676,211.
	ction B. Total Support	1				· · · · · · · · · · · · · · · · · · ·	
	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	9,313,501.	11,333,100.	14,659,146.	9,994,567.	15,319,187.	60,619,501.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	205 262		44 162	10 111	FF 460	200 705
	and income from similar sources	205,362.	66,600.	44,163.	19,111.	55,469.	390,705.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	170	E 224	20 602	250	E0 001	104 210
	assets (Explain in Part VI.)	178.	5,344.	39,683.	250.	30,004.	104,319.
11	•••		,			40	61,114,525.
12	Gross receipts from related activities,					521( )(2)	200,024.
13	First five years. If the Form 990 is for	-	s first, second, thir	d, fourth, or fifth ta	ix year as a sectio	n 501(c)(3)	. □
Sec	organization, check this box and storection C. Computation of Publ		rcentage				<b>P</b>
	Public support percentage for 2018 (			olumn (fl)		14	66.56 %
15	Public support percentage from 2017					15	61.75 %
	33 1/3% support test - 2018. If the o					•	
	<b>stop here.</b> The organization qualifies	•		,		,	<b>►</b> X
b	33 1/3% support test - 2017. If the o						
_	and <b>stop here.</b> The organization qual						<b>▶</b> □
17a	10% -facts-and-circumstances tes						or more.
	and if the organization meets the "fac	ū					•
	meets the "facts-and-circumstances"			-	•	_	
b	10% -facts-and-circumstances tes						
~	more, and if the organization meets the	_					
	organization meets the "facts-and-cire		•				
18	Private foundation. If the organization						s

Schedule A (Form 990 or 990-EZ) 2018

#### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
_	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
J	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
/ 6	Amounts included on lines 1, 2, and						
,	3 received from disqualified persons Amounts included on lines 2 and 3 received						_
•	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						_
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		1				<u> </u>
	endar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6						
108	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	on 501(c)(3) organi	zation,
	check this box and stop here	<u></u>					<u></u> ▶□
<u>Se</u>	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2018 (	ine 8, column (f), o	divided by line 13,	column (f))		15	%
16	Public support percentage from 2017	Schedule A, Part	: III, line 15			16	%
Se	ction D. Computation of Inves	stment Incom	e Percentage				
17	Investment income percentage for 20	18 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
18	Investment income percentage from	<b>2017</b> Schedule A,	Part III, line 17			18	%
	33 1/3% support tests - 2018. If the					33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a						<b>&gt;</b>
ŀ	33 1/3% support tests - 2017. If the						and
	line 18 is not more than 33 1/3%, che						
20							

#### Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	За		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5с		
	6		
	7		
	8		
	9a		
	9b		
	ЭIJ		
	9с		
	10a		
	10b		
m 9	90 or 99	90-EZ)	2018

Do	dt IV O		- 10	igo <b>o</b>
Pa	rt IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
_	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)	•		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	ÍП	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	_		
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	-		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	anizations			
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions					
	other Type III non-functionally integrated supporting organizations must co	mplete 9	Sections A through E.			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other					
	factors (explain in detail in <b>Part VI</b> ):					
_2	Acquisition indebtedness applicable to non-exempt-use assets	2				
_3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,					
	see instructions)	4				
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
_6_	Multiply line 5 by .035	6				
_7_	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functionall	y integra	ated Type III supporting org	anization (see		
	instructions).					

Schedule A (Form 990 or 990-EZ) 2018

Par	rt V   Type III Non-Functionally Integrated 509	9(a)(3) Supporting Org	anizations <sub>(continued)</sub>	
Secti	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exem			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	ses of supported organizatior	ns	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is responsive	e	
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	,	(i)	(ii)	(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
	=:::==:=			

Schedule A (Form 990 or 990-EZ) 2018

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

**Schedule of Contributors** 

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Atlas Economic Research Foundation

Employer identification number

94-2763845

Organization type (check one): Filers of: Section: X = 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \_\_\_\_\_\_ 🕨 \$ \_ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF),

but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization Employer identification number

# Atlas Economic Research Foundation

94-2763845

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1		\$820,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 3,105,213.	Person X Payroll
(a) No.	(b)	(c) Total contributions	(d)
3	Name, address, and ZIP + 4	\$ 500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	Total contributions \$ 630,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) Total contributions	(d) Type of contribution
No. 6	Name, address, and ZIP + 4	\$ 2,819,617.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

# Atlas Economic Research Foundation

94-2763845

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4	\$\frac{1,500,000.}{}	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$311,800.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$1,385,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

# Atlas Economic Research Foundation

94-2763845

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		. \$	

Name of organization Employer identification number 94-2763845 Atlas Economic Research Foundation Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year Part III from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

►Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Atlas Economic Research Foundation

Employer identification number 94-2763845

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	e conferring
	impermissible private benefit?		
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	education) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by th	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements		
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations, and enforcing cor	nservation easements during the year
	<b></b>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year
	<b>▶</b> \$		
8	Does each conservation easement reported on line 2(d) abor		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservat	·	
	include, if applicable, the text of the footnote to the organiza	ition's financial statements that describes	s the organization's accounting for
Dor	conservation easements.  t III   Organizations Maintaining Collections or	of Art Historical Transuras or (	Other Similar Assets
Par		· ·	Other Similar Assets.
4-	Complete if the organization answered "Yes" on Form		
та	If the organization elected, as permitted under SFAS 116 (AS	•	
	historical treasures, or other similar assets held for public ex		ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that described as assistant and a second text of the constraints and the second text of the constraints and the second text of the constraints and the second text of the		
D	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of pu	ublic service, provide the following amounts
	relating to these items:		. Δ
	(i) Revenue included on Form 990, Part VIII, line 1		
^			
2	If the organization received or held works of art, historical tre		ai gain, provide
_	the following amounts required to be reported under SFAS 1		<b>•</b>
a	Revenue included on Form 990, Part VIII, line 1		
a	Assets included in Form 990, Part X		▶ ⊅

	t III Organizations Maintaining C	collections of A						ssets/continu	9-
3	Using the organization's acquisition, accessi				-			•	
Ü	(check all that apply):	ori, and other record	<i>1</i> 3, 01100	it arry or the	Tollowing the	it are a sig	illioant asc (	or its conceiler	itoms
а	Public exhibition	d		l nan or evo	hange progra	ame			
b	Scholarly research	e		Other	mange progn	21113			
C	Preservation for future generations	•		Other					
4	Provide a description of the organization's co	alloctions and avalai	n how th	ov furthor t	ho organizati	on's ovom	nt nurnoso ir	Dort VIII	
5	During the year, did the organization solicit of							Trait Alli.	
3	to be sold to raise funds rather than to be ma							Yes	☐ No
Pai	t IV Escrow and Custodial Arran								INO
. u.	reported an amount on Form 990, Pal		בוכ וו נווכ	Giganizatio	ni answered	ies oili	01111 990, Fa	it iv, iiile 9, oi	
1a	Is the organization an agent, trustee, custod		diary for	contribution	ns or other as	sets not ir	ncluded		
	on Form 990, Part X?							Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII								
-	Too, explain the arrangement in arrain	and complete the re	ow.ig	abio.				Amount	
c	Beginning balance						1c	, unounc	
	Additions during the year								
	Distributions during the year								
	Ending balance								
	Did the organization include an amount on F							Yes	□ No
	If "Yes," explain the arrangement in Part XIII.		•				,	••	
	t V Endowment Funds. Complete i								
		(a) Current year		rior year	(c) Two yea		) Three years	hack (a) Four	years back
12	Beginning of year balance	•	(6)	noi yeai	(C) TWO YOU	TO DUOK (C	j moo youro	buok (C) rour	youro buok
	Contributions								
	Net investment earnings, gains, and losses								
	Grants or scholarships								
e	Other expenditures for facilities								
	and programs								
	Administrative expenses								
g	End of year balance		/!: 1	l /-	-\\    -				
2	Provide the estimated percentage of the curr	rent year end baland	•	g, column (a	a)) neid as.				
	Board designated or quasi-endowment	0/	_%						
	Permanent endowment	%							
С	Temporarily restricted endowment	%							
•	The percentages on lines 2a, 2b, and 2c sho	· ·							
За	Are there endowment funds not in the posse	ession of the organiza	ation tha	at are neld a	ind administe	erea for the	e organization		<u>, , , , , , , , , , , , , , , , , , , </u>
	by:							- t	Yes No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza				·			3b	
Do:	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		owment	tunas.					
Pai			0 D4 IV	/ Uma dda (	Cas Farms 000	D-4 V 1:	10		
	Complete if the organization answere	1						1 (55 )	
	Description of property	(a) Cost or o			or other		umulated	(d) Book	value
	Land	`	nent)	Dasis	(other)	uepr	eciation		
	Land								
	Buildings			7 2	5,398.		40,300.	605	,098.
	Leasehold improvements				0,739.		$\frac{10,300}{28,172}$		2,567.
	Equipment				0,133.		40,1/4e	) 44	,,,,,,,,
	Other		· ·	(D) "	10-1		<u> </u>	707	665
ıota	. Add lines 1a through 1e. (Column (d) must e	quai ⊢orm 990, Part	x, colur	nn (B), line 1	ı uc.)		<u> </u>	101	7,665.

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 Atlas Econo	mic Research	Foundation	94-2763845 Page <b>3</b>
Part VII Investments - Other Securities.			-
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: C	Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)		1	
(D)			
(E)			
(F)			
(G)			
(H)  Total (Col. (h) must squal Form 000, Part V. col. (P) line 12.)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ► Part VIII Investments - Program Related.			
	on Form 000 Dort IV lin	a 11a Caa Farm 000 Dart V lin	- 10
Complete if the organization answered "Yes"  (a) Description of investment	(b) Book value		Cost or end-of-year market value
	(b) Book value	(b) Motriod of Valuation.	Soot of one of year market value
<u>(1)</u> (2)		+	
(3)			
(4)			
(5)			_
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line	e 15.
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	e 15.)		▶
	an Farm 000 Dart IV lin	- 11 : 116 C Faure 000 Day	+ V line 05
Complete if the organization answered "Yes"  (a) Description of liability	on Form 990, Part IV, IIIn	(b) Book value	τ X, line 25.
		(b) Book value	
(1) Federal income taxes (2) Deferred rent and lease i	ncentive	865,853.	
	.11001101 V G	000,000	
(3)			
<u>(4)</u> (5)			
(6)			
\ /			

(7) (8)

865,853.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ightharpoons2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

			•		
_	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			1	15,967,745
1					13,301,143
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2a	-1,840.		
a	Net unrealized gains (losses) on investments		451,130.		
b	Donated services and use of facilities  Recoveries of prior year grants		431,130.		
q					
d	Other (Describe in Part XIII.) Add lines 2a through 2d			2e	449,290
3				3	15,518,455
4	Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part VIII, line 12, but not on line 1:			-	23,323,233
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	113.		
b	Other (Describe in Part XIII.)				
	Add lines 4a and 4b			4c	113
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12.)			5	15,518,568
	t XII Reconciliation of Expenses per Audited Financial Stateme				
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
1	Total expenses and losses per audited financial statements			1	12,289,447
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			-	, ,
a	Donated services and use of facilities	2a	451,130.		
b	Prior year adjustments	-	·		
С	Other losses	2c			
d	Other (Describe in Part XIII.)	<del> </del>			
е	Add lines 2a through 2d	•		2e	451,130
3	Subtract line <b>2e</b> from line <b>1</b>			3	11,838,317
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	113.		
b	Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b	•		4c	113
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	11,838,430
Pa	t XIII Supplemental Information.				
Prov	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I	IV, lines 1b	and 2b; Part V, line	4; Part	X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addi	tional infor	mation.		
Pa:	ct X, Line 2:				
				-	
Maı	nagement has evaluated the Organization's t	cax po	sitions an	a c	oncluded
L 1L .					
CH	at the financial statements do not inclue a	any un	icertain ta	хр	ositions.

### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

#### **Statement of Activities Outside the United States**

 $\blacktriangleright$  Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2018
Open to Public Inspection

Name of the organization

**Employer identification number** 

Atlas Economic	Research	Foundat	ion		94-276384	<b>1</b> 5
			tside the United States. Complet	e if the organ		
Form 990, Part IV	/, line 14b.					
1 For grantmakers. Does	the organization	n maintain recor	ds to substantiate the amount of its grar	nts and other	assistance,	
the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	grants or ass	istance?	Yes X No
2 For grantmakers. Desc	ribe in Part V the	e organization's	procedures for monitoring the use of its	grants and o	ther assistance out	side the
United States.						
3 Activities per Region. (TI	ne following Parl	I, line 3 table c	an be duplicated if additional space is ne	eeded.)		
(a) Region	(b) Number of		j , <i>i</i>		vity listed in (d)	(f) Total
	offices	employees, agents, and	(by type) (such as, fundraising, pro-	•	gram service,	expenditures for and
	in the region	independent contractors	gram services, investments, grants to		e specific type	investments
		in the region	recipients located in the region)	or service	(s) in the region	in the region
North America -			Grants to recipients			
Canada and Mexico	0	0	located in region			267,534.
Russia and	_	_	Grants to recipients			
Neighboring States	0	0	located in region			204,639.
			Grants to recipients			
South America	0	0	located in region			911,790.
						<del>                                     </del>
			Grants to recipients			
South Asia	0	0	located in region			228,091.
T 3-1 4-1-						
East Asia and the Pacific	0	,	Grants to recipients  located in region			101 101
Pacific	0	0	located in region			181,101.
Europe (Including			Grants to recipients			
Iceland & Greenland)	0	0	located in region			928,353.
			Grants to recipients			
Sub-Saharan Africa	0	0	located in region			297,767.
Central America and			Grants to recipients			
the Caribbean	0	0	located in region			783,571.
3 a Subtotal	0					3,802,846.
<b>b</b> Total from continuation						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

0

0

Schedule F (Form 990) 2018

409,108.

4,211,954.

sheets to Part I

c Totals (add lines 3a

and 3b)

Part I   Continuatio	n of Activitie	s per Regio	<b>n.</b> (Schedule F (Form 990), Part I, line 3	3)	<u> </u>
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and			Grants to recipients		
North Africa	0	0	located in region		409,108.
					-
Totals					409,108.

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
		Central America						
		and the Caribbean	Economic Education	6,248.	Wire	0.		
		Central America						
		and the Caribbean	Economic Education	8,000.	Wire	0.		
		Central America						
		and the Caribbean	Economic Education	19,000.	Wire	0.		
		Central America						
			Economic Education	30,000.	Wire	0.		
		Central America	D	46.057	574	0		
		and the Caribbean	Economic Education	46,257.	wire	0.		
		Central America				_		
		and the Caribbean	Economic Education	46,500.	Wire	0.		
		Central America						
		and the Caribbean	Economic Education	612,500.	Wire	0.		
		East Asia and the						
		Pacific	Economic Education	6,000.	Wire	0.		

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt
	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

.....

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Schedule F (Form 990) 2018

Schedule F (Form 990) 2018

Atlas Economic Research Foundation

Bowl I C .: .:			5 O			03043	41	Page /
		Assistance to Organiza	ations or Entities Outside the	United States	. (Schedule F (Form 9			
1	(b) IRS code section	(a) Danien	(d) Purpose of	(e) Amount	(f) Manner of	(g) Amount of	(h) Description	(i) Method of
(a) Name of organization	and EIN (if applicable)	(c) Region	grant	of cash grant	cash disbursement	non-cash assistance	of non-cash assistance	valuation (book, FM appraisal, other)
			-			doolotarioc	40010141100	appraisar, strict)
		East Asia and the						
		Pacific	Economic Education	6,500.	Wire	0.		
		East Asia and the						
		Pacific	Economic Education	7,500.	Wire	0.		
		East Asia and the						
		Pacific	Economic Education	8,520.	Wire	0.		
		East Asia and the						
		Pacific	Economic Education	15,658.	Wire	0.		
				,				
		East Asia and the						
		Pacific	Economic Education	23,500.	Wire	0.		
		East Asia and the						
		Pacific	Economic Education	24,000.	Wire	0.		
		1 401110	Legismie Laugueien	21,000.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		East Asia and the						
		Pacific	Economic Education	26,769.	Wino	0.		
		Facilic	Economic Education	20,703.	WILE	0.		
		East Asia and the		F1 060	L			
		Pacific	Economic Education	51,969.	Wire	0.		
		Europe (Including						
		Iceland &						
		Greenland)	Economic Education	6,000.	Wire	0.		

Part II Continuation of			ations or Entities Outside the			900 Part II line 1	1)	Page
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(a) Degion	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		Europe (Including Iceland &						
		Greenland)	Economic Education	6,500.	Wire	0.		
		Europe (Including Iceland & Greenland)	Economic Education	8 000	W-1	0.		
		Greeniand)	ECONOMIC Education	8,000.	wire	0.		
		Europe (Including Iceland & Greenland)	Economic Education	10,000.	Wire	0.		
		Europe (Including Iceland & Greenland)	Economic Education	10,000.	Wire	0.		
		Europe (Including						
		Greenland)	Economic Education	12,500.	Wire	0.		
		Europe (Including Iceland & Greenland)	Economic Education	15,000.	Wire	0.		
		Europe (Including Iceland & Greenland)	Economic Education	15,500.	Wire	0.		
		Europe (Including Iceland & Greenland)	Economic Education	16,000.		0.		
		Europe (Including Iceland & Greenland)	Economic Education	17,500.		0.		

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Part II Continuation of	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	. (Schedule F (Form 9	990), Part II, line	1)	·
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM' appraisal, other)
		D / T 1 4						
		Europe (Including Iceland &						
		Greenland)	Economic Education	20,000.	Wire	0.		
		,						
		Europe (Including						
		Iceland &						
		Greenland)	Economic Education	21,000.	Wire	0.		
		Europe (Including						
		Iceland & Greenland)	Economic Education	24,500.	Wi no	0.		
		Greeniand)	Economic Education	24,500.	wire	0.		
		Europe (Including						
		Iceland &						
		Greenland)	Economic Education	26,500.	Wire	0.		
		Europe (Including						
		Iceland &				_		
		Greenland)	Economic Education	27,411.	Wire	0.		
		Europe (Including						
		Iceland &						
		Greenland)	Economic Education	36,500.	Wire	0.		
				,				
		Europe (Including						
		Iceland &						
		Greenland)	Economic Education	35,000.	Wire	0.		
		Europe (Including						
		Iceland & Greenland)	Economic Education	40,000.	Wire	0.		
		promiuma/		40,000.	,,,,,,,	· · ·		
		Europe (Including						
		Iceland &						
		Greenland)	Economic Education	40,158.	Wire	0.		

Schedule F (Form 9			search Foundaci			03043		Page 2
Part II Contin	uation of Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of orgar	(b) IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
		Europe (Including						
		Iceland & Greenland)	Economic Education	45,000.	Wire	0.		
		Europe (Including						
		Iceland &						
		Greenland)	Economic Education	46,320.	Wire	0.		
		Europe (Including						
		Iceland &						
		Greenland)	Economic Education	103,400.	Wire	0.		
		Europe (Including						
		Iceland &						
		Greenland)	Economic Education	134,828.	Wire	0.		
		Europe (Including						
		Iceland &						
		Greenland)	Economic Education	159,000.	Wire	0.		
		Middle East and				_		
		North Africa	Economic Education	8,000.	Wire	0.		
		Middle East and						
		North Africa	Economic Education	15,000.	Wire	0.		
		Middle East and		4	L.	_		
		North Africa	Economic Education	15,000.	Wire	0.		
		Middle East and			<u></u>			
		North Africa	Economic Education	97,057.	Wire	0.		

832182

Part II Continuation of	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	. (Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM' appraisal, other)
		Middle East and						
		North Africa	Economic Education	118,726.	Wire	0.		
		Middle East and						
		North Africa	Economic Education	155,000.	Wire	0.		
		North America	Esamania Education	9,000.	Mi na	0.		
		North America	Economic Education	9,000.	wire	0.		
		North America	Economic Education	15,000.	Wire	0.		
				,				
		North America	Economic Education	16,900.	Wire	0.		
		North America	Economic Education	20,000.	Wire	0.		
		North America	Economic Education	25,140.	Wire	0.		
		North Amorica	Bannamia Education	EE 750	Wi no			
		North America	Economic Education	55,752.	wire	0.		
		North America	Economic Education	125,000.	 Wire	0.		
		r		,,,,,,,,	·r·	·		

	F (FOIIII 990)			Bearen Toundaer			03043		Page Z
Part II	Continuation o	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
<b>1</b> (a) Nam	e of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			Russia and						
			Neighboring						
			States	Economic Education	12,134.	Wire	0.		
			Russia and						
			Neighboring						
			States	Economic Education	12,962.	Wire	0.		
			[						
			Russia and						
			Neighboring	n	12.000	17.1	0		
			States	Economic Education	13,000.	wire	0.		
			Russia and						
			Neighboring						
			States	Economic Education	13,000.	Wire	0.		
			50005	DOGRAMIO DAGGACION	13,000.				
			Russia and						
			Neighboring						
			States	   Economic Education	15,000.	Wire	0.		
					,				
			Russia and						
			Neighboring						
			States	Economic Education	24,671.	Wire	0.		
			Russia and						
			Neighboring						
			States	Economic Education	25,000.	Wire	0.		
			[						
			Russia and						
			Neighboring	L, .,		L.			
			States	Economic Education	77,232.	Wire	0.		
			South America	Economic Education	6,000.	Wire	0.		
			pouch America	ECONOMIC Education	1 0,000.	MITT C	U .		

	(1 01111 9 9 0 )								1 age <b>2</b>
Part II	Continuation o	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	. (Schedule F (Form 9	90), Part II, line	1)	
<b>1</b> (a) Name	e of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			South America	Economic Education	6,000.	Wire	0.		
			South America	Economic Education	6,000.	Wire	0.		
			South America	Economic Education	8,000.	Wire	0.		
			South America	Economic Education	10,000.	Wire	0.		
			South America	Economic Education	10,000.	Wire	0.		
					12.000				
			South America	Economic Education	13,000.	wire	0.		
			South America	Economic Education	14,501.	Wire	0.		
					,				
			South America	Economic Education	14,965.	Wire	0.		
			South America	Economic Education	15,000.	Wire	0.		

_	1 (101111990)					<u> </u>			r age <b>z</b>
Part II	Continuation of	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9			
1 (a) Name	e of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			South America	Economic Education	15,600.	Wire	0.		
			South America	Economic Education	15,840.	Wire	0.		
			South America	Economic Education	18,000.	Wire	0.		
			Bouth America	Economic Education	18,000.	WITE	0.		
			South America	Economic Education	19,950.	Wire	0.		
			South America	Economic Education	20,000.	Wire	0.		
			South America	Economic Education	21 000	Wino	0		
			South America	Economic Education	21,000.	wire	0.		
			South America	Economic Education	23,458.	Wire	0.		
			South America	Economic Education	26,000.	Wire	0.		
			South America	Economic Education	30,000.	Wire	0.		

Part II Continuation of	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
		South America	Economic Education	30,000.	Wire	0.		
		South America	Economic Education	37,305.	Wire	0.		
		South America	Economic Education	50,000.	Wire	0.		
		South America	Economic Education	50,000.	Wire	0.		
		South America	Economic Education	54,286.	Wire	0.		
		poden America	Beoliomic Education	34,200.	WITE	0.		
		South America	Economic Education	81,481.	Wire	0.		
		South America	Economic Education	100,000.	Wire	0.		
		South America	Economic Education	166,607.	Wire	0.		
		South Asia	Economic Education	18,970.	Wire	0.		

Part II Continuation of	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9		1)	
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	( <b>d)</b> Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
		South Asia	Economic Education	23,250.	Wire	0.		
		South Asia	Economic Education	37,049.	Wire	0.		
		South Asia	Economic Education	51,905.	Wire	0.		
				50 445				
		South Asia	Economic Education	70,447.	wire	0.		
		Sub-Saharan Africa	Economic Education	6,000.	Wire	0.		
		Sub-Saharan						
		Africa	Economic Education	8,000.	Wire	0.		
		Sub-Saharan						
		Africa	Economic Education	8,000.	Wire	0.		
		Sub-Saharan Africa	Economic Education	10,730.	Wire	0.		
				20,730.				
		Sub-Saharan Africa	Economic Education	17,000.	Wire	0.		

	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9			1
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		Sub-Saharan						
		Africa	Economic Education	18,000.	Wire	0.		
		Sub-Saharan						
		Africa	Economic Education	21,256.	Wire	0.		
		Sub-Saharan						
		Africa	Economic Education	23,271.	Wire	0.		
		Sub-Saharan						
		Africa	Economic Education	32,500.	Wire	0.		
		Sub-Saharan						
		Africa	Economic Education	33,430.	Wire	0.		
		Sub-Saharan	D	42.250	77 i	0		
		Africa	Economic Education	43,250.	wire	0.		+
		Sub-Saharan Africa	Economic Education	55,000.	Wire	0.		
		Allica	Beonomic Education	33,000.	WITE	0.		
								1

94-2763845 Schedule F (Form 990) 2018 Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (c) Number of (f) Amount of (g) Description of (d) Amount of (e) Manner of (h) Method of (a) Type of grant or assistance (b) Region valuation cash grant recipients cash disbursement noncash noncash assistance (book, FMV, assistance appraisal, other) North America -Economic education Canada and Mexico 20,000.Wire 1 0 Economic education South America 2,688.Wire 0 Economic education South Asia 13 9,570.Wire 0 East Asia and the Economic education Pacific 3 1,888.Wire 0. Europe (Including Iceland & Greenland) 6 6,276.Wire Economic education 0. Sub-Saharan Economic education Africa 3 2,417.Wire 0. Central America Economic education and the Caribbean 3 4,407.Wire 0. Russia and Neighboring Economic education States -2 1,640.Wire 0

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2018

# Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

P	ar	⊢	Т	Li	ne	2	•
-	$\alpha_{\perp}$	L	<b>-</b> ,			4	

Atlas relies on the Grant Committee of its Board of Directors to provide
oversight of the work of Atlas staff in establishing the eligibility and
appropriateness of candidates for grants within Atlas programs. Atlas
supports (A) organizations that operate as non-profit research
institutes, (B) "intellectual entrepreneurs" embarking on the creation of
such organizations, and (C) scholars working in fields of intellectual
inquiry relevant to Atlas programs. Grantees receiving funds from Atlas
must provide reports regarding the use of funds, except for those
instances in which Atlas's grants represent prizes to recognize
outstanding work (already completed or ongoing) in the fields of endeavor
central to the Atlas mission.

#### SCHEDULE I (Form 990)

# **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047 **2018** 

Open to Public Inspection

Department of the Treasury Internal Revenue Service

**Employer identification number** Name of the organization Atlas Economic Research Foundation 94-2763845 Part I **General Information on Grants and Assistance** 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection X Yes criteria used to award the grants or assistance? No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments, Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (a) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant non-cash noncash assistance or assistance FMV, appraisal, assistance other) American Institute for Economic Research - P.O. Box 1000 - GT 04-2121305 501c3 Economic education Barrington, MA 01230 54,133 0 Archbridge Institute 810 7th Street NE Washington, DC 20002 47-4252296 501c3 15,000 Economic education Buckeye Institute 88 East Broad Street, Suite 1120 Columbus, OH 43215 31-1278593 501c3 31,369 0 Economic education Cardinal Institute for West Virginia - P.O. Box 11495 -Charleston WV 25339 47-1932521 47 500 Economic education Cedice Foundation 4075 Wilson Blvd. Suite 310 501c3 Arlignton, VA 22203 52-1711334 27 200 0 Economic education Center for Independent Thought 1420 Walnut St. Suite 1011 Philadelphia, PA 19102 52-0945376 501c3 10 000 0 Economic education 19. 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

3 Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2018)

Part II Continuation of Grants and Other		overnments and Orga		nited States (Sch	edule I (Form 990), Pa		4 2703043 Pa
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Commonwealth Foundation							
225 State St, Suite 302							
Harrisburg, PA 17101	23-2473845	501c3	25,085.	0.			Economic education
Franklin Center for Government and							
Public Integrity - 107 S. West St.							
Suite 718 - Alexandria, VA 22314	26-4066298	501c3	10,000.	0.			Economic education
Garden State Initiative, Inc.							
P.O. Box 9180 Morristown, NJ 07963	81-4373354	E01a2	7,500.	0.			Economic education
MOTTISCOWII, NO 07963	81-43/3334	50103	7,500.	0.			Economic education
Georgia Center for Opportunity							
333 Research Ct, #210							
Peachtree Corners, GA 30092	58-1928520	501c3	35,405.	0.			   Economic education
•			· ·				
Libertas Institute							
785 E 200 S, Suite 2							
Lehi, UT 84043	45-5254794	501c3	10,000.	0.			Economic education
Mercatus Center							
3434 Washington Blvd., 4th Floor	F4 1436004	F04 2	05.065				
Arlington, VA 22201	54-1436224	50163	25,867.	0.			Economic education
Mont Pelerin Society							
313 Flethcher Hall, Dept 6106 615 N	 Nr						
Chattanooga, TN 37403		501c3	10,000.	0.			Economic education
enasanosga, in svits	17 3310733	30100	10,000.	•			LOONOMIC CAACACION
Palmetto Promise Institute							
P.O. Box 12676							
Columbia, SC 29211	26-3077338	501c3	30,000.	0.			Economic education
·							
Pioneer Institute							
185 Devonshire St, Suite 1011							
Boston, MA 02110	22-2632081	501c3	11,500.	0.			Economic education

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Students for Liberty 2221 S Clark St, 12th Floor	94-3435899	501c3	60 816	0.			Economic education
Arlington, VA 22202 Taliesin Nexus 619 South Olie Street, #403	94-3433699	50103	60,816.	0.			Economic education
Los Angeles, CA 90014	27-4737588	501c3	115,687.	0.			Economic education
The E Foundation for Oklahoma 1200 NW 63rd St, Suite 100-D Oklahoma City, OK 73116	47-4570634	501c3	55,000.	0.			Economic education
The Foundation for Research on Equal Opportunity - 201 W 5th St,	1, 15,0051	50105	33,000.				
Suite 1100 - Austin, TX 78701	81-2699310	501c3	7,500.	0.			Economic education
Young Voices 1342 Florida Ave NW							
Washington, DC 20009	81-2593815	501c3	15,175.	0.			Economic education

Part III can be duplicated if additional space is needed.  (a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of non-	(e) Method of valuation	(f) Description of noncash assistance		
(a) Type of graft of assistance	recipients	cash grant	cash assistance	(book, FMV, appraisal, other)	(i) Description of Horicash assistance		
			(1)				
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	n (b); and any other a	dditional information.			
Part I, Line 2:							
Atlas relies on the Grant Committe	e of its	Board of	Directors	to provide			
oversight of the work of Atlas sta	ff in es	tablishing	g the eligi	bility and			
appropriateness of candidates for	grants w	ithin Atla	as programs	. Atlas			
supports (A) organizations that op	erate as	non-profi	t research	institutes,			
(B) "intellectual entrepreneurs" e	mbarking	on the cr	reation of	such			
organizations, and (C) scholars wo	rking in	fields of	intellect	ual inquiry			
relevant to Atlas programs. Grantees receiving funds from Atlas must							

provide reports regarding the use of funds, except for those instances in

Part IV	Suppleme	ntal Inforn	nation					
which	Atlas's	grants	represent	prizes	to recog	nize outsta	nding work	<b>S</b>
(alrea	ady comp	leted c	or ongoing)	in the	fields o	of endeavor	central to	the
Atlas	mission	•						

### **SCHEDULE J** (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Department of the Treasury

Internal Revenue Service

Atlas Economic Research Foundation

Employer identification number 94-2763845

		-2/0304		
P	art I Questions Regarding Compensation		1	
			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
h	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
_	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
	trustees, and officers, including the OLO/Executive Director, regarding the items checked of fine 1a?			
2	Indicate which if any of the following the filing expenization used to establish the compensation of the expenization's			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee	e		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		х
b				Х
	Participate in, or receive payment from, an equity-based compensation arrangement?			Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			l
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and (D) Nontaxable		(E) Total of columns	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred on prior Form 990
(1) Bradley A Lips	(i)	335,562.	0.	270.	0.	36,107.	371,939.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) Matt Warner	(i)	240,454.	0.	162.	0.	33,564.	274,180.	0.
COO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) Tom Palmer	(i)	256,480.	0.	1,188.	0.	25,598.	283,266.	0.
Vice-President of International Prog	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) Daniel Anthony	(i)	160,270.	0.	270.	0.	6,091.	166,631.	0.
VP of Marketing and Communications	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) Romulo Lopez	(i)	117,887.	0.	270.	0.	32,343.		0.
Director of Finance	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part I

Types of Property

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization Atlas Economic Research Foundation Employer identification number 94-2763845

			(a) Check if	(b) Number of contributions or	(c) Noncash contribution amounts reported on	(d) Method of de	etermin	•	•
			applicable		Form 990, Part VIII, line 1g	noncash contrib	ווטווג	nount	5
1	Art - Works of	art							
2		treasures							
3		interests							
4		olications							
5		ousehold goods							
6		vehicles							
7		nes							
8		perty							
9		blicly traded		8	31,353.				
10		sely held stock			-				
11		rtnership, LLC, or							
12		scellaneous							
13		ervation contribution -							
		ıres							
14		ervation contribution - Other							
15		esidential							
16		ommercial							
17		ther							
18									
19		'							
20		dical supplies							
21									
22		ıcts							
23		imens							
24		artifacts							
25	Other (	Software )	X	1	20,580.	FMV			
26	Other ► (	)							
27	Other ► (	)							
28	Other ► (	)							
29	Number of For	ms 8283 received by the orga	anization durin	g the tax year for o	ontributions				
	for which the c	organization completed Form	8283, Part IV,	Donee Acknowled	gement <b>29</b>				
								Yes	No
30a	During the yea	r, did the organization receive	by contribution	on any property rep	oorted in Part I, lines 1 throu	gh 28, that it			
	must hold for a	at least three years from the d	ate of the initia	al contribution, and	d which isn't required to be u	sed for			
	exempt purpos	ses for the entire holding perio	od?				30a		X
b	If "Yes," descr	ibe the arrangement in Part II.							
31	Does the organ	nization have a gift acceptanc	e policy that r	equires the review	of any nonstandard contribu	utions?	31	Х	
32a	Does the organ	nization hire or use third partie	es or related o	rganizations to soli	cit, process, or sell noncash				
	contributions?						32a		X
b	If "Yes," descr	ibe in Part II.							
33	If the organizat	tion didn't report an amount ir	n column (c) fo	or a type of propert	y for which column (a) is che	cked,			
	describe in Par	t II.							
_HA	For Paperwe	ork Reduction Act Notice, se	ee the Instruc	tions for Form 99	0.	Schedule I	Л (Forn	n 990)	2018

Schedule M	(Form 990) 2018	Atlas	Economic	Research	Foundation	94-2763845	Page 2
Part II	Supplemental	Informati	tion. Provide the	information requir	red by Part I, lines 30b. 3	32b, and 33, and whether the organizated, or a combination of both. Also com	ation

## SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

➤ Attach to Form 990 or 990-EZ.

➤ Go to www.irs.gov/Form990 for the latest information.

2018
Open to Public

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Atlas Economic Research Foundation

Employer identification number 94-2763845

Form 990, Part I, Line 1, Description of Organization Mission:

independent civil society organizations that promote individual freedom
and remove barriers to human flourishing.

Form 990, Part VI, Section B, line 11b:

A draft of the Federal form 990 is reviewed by the Audit Committee. After reviewing the 990, the Audit Committee provides a draft copy to the full Board for review. After addressing any questions from the full Board, the Audit Committee approves the 990 for filing with the IRS.

Form 990, Part VI, Section B, Line 12c:

Officers, directors, and key employees are required annually to sign statements disclosing conflicts of interest.

Form 990, Part VI, Section B, Line 15:

Atlas has a Compensation Committee that is composed of independent persons.

Decisions of the committee are based on comparative analysis of

compensation levels and trends at peer non-profit institutions. The

committee decides and approves compensation of the CEO. This was last done
in December, 2017.

Form 990, Part VI, Line 17, List of States receiving copy of Form 990:

AK,AL,AR,CA,CO,CT,DC,FL,GA,IL,KY,LA,MA,MD,MI,ME,MN,MS,MO,NJ,NM,NY,NH,NC,ND

OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI

Form 990, Part VI, Section C, Line 19:

Atlas Economic Research Foundat	ion	94-2763845
Atlas posts its forms 990 and audited financi	al statement	s on its website.
It does not make its governing documents or o	onflict of i	nterest policy
available to the public.		