	aan	
Form	330	

Department of the Treasury

Internal Revenue Service

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) 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.



ΑΙ	For th	e 2022 calendar year, or tax year beginning a	Ind ending		
B	Check if applicat	e: C Name of organization		D Employer identific	cation number
	Addr	Atlas Economic Research Foundation			
	Name	Doing business as Atlas Network		94-27638	45
	Initial returr	Number and street (or P.0. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final returr	4075 Wilson Blvd	310	(202) 44	9-8449
_	termi ated			G Gross receipts \$	19,446,645.
	Amer	ATTINCON, VA 22205		H(a) Is this a group re	
	Appli tion pend			for subordinates	? Yes X No
	-	same as C above		H(b) Are all subordinates in	
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)	(1) or 527		list. See instructions
-	Webs	V	<u> </u>	H(c) Group exemption	
	_	f organization: X Corporation Trust Association Other	L Year	of formation: 1981 N	State of legal domicile: DE
Pa	art I	Summary	lag Noti	ank ingrood	og globol
e	1	Briefly describe the organization's mission or most significant activities: At prosperity by strengthening a network of	of inder	ondent narti	es giobai
Activities & Governance					
veri	2		•	1 1	14 sets.
ĝ	3				14
80 00	4	Number of independent voting members of the governing body (Part VI, line 1 Total number of individuals amplaued in colondar year 2022 (Part VI line 2a)			47
itie	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)			 0
ž		Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12			0.
¥		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
•	8	Contributions and grants (Part VIII, line 1h)		17,626,501.	19,127,386.
Revenue	9	Program service revenue (Part VIII, line 2g)		109,548.	234,344.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		77,045.	73,972.
£	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		497,150.	10,943.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 1		18,310,244.	19,446,645.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		6,140,515.	8,834,317.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-	10)	4,422,104.	4,976,917.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ъре	b	Total fundraising expenses (Part IX, column (D), line 25) 1,571	,190.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		6,539,953.	7,051,166.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		17,102,572.	20,862,400.
	19	Revenue less expenses. Subtract line 18 from line 12		1,207,672.	-1,415,755.
Net Assets or Fund Balances			В	eginning of Current Year	End of Year
sset	20	Total assets (Part X, line 16)		17,184,038.	16,820,562.
at As	21	Total liabilities (Part X, line 26)		2,196,736.	3,240,362.
		Net assets or fund balances. Subtract line 21 from line 20		14,987,302.	13,580,200.

Part II Signature Block

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

	(Ilm						
Sign	Signature of officer	Date 04/18/2022					
Here	Bradley A. Lips, CEO	04/18/2023					
	Type or print name and title						
	Print/Type preparer's name Preparer's signature	Date Check PTIN					
Paid	Print/Type preparer's name Preparer's 'signature Jie Chen, CPA Preparer's 'signature Firm's name Rogers & Company	4/18/23 ^{if} self-employed P01049760					
Preparer	Firm's name Rogers & Company PLLC	Firm's EIN 58-2676261					
Use Only	Firm's address 8300 Boone Boulevard, Suite 600						
	Vienna, VA 22182	Phone no. (703) 893-0300					
May the I	May the IRS discuss this return with the preparer shown above? See instructions						
232001 12-1	3-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.	Form 990 (2022)					

See Schedule O for Organization Mission Statement Continuation

Form	Atlas Economic Research Foundation	94-2763845	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	Atlas Network increases global prosperity by strengther	ning a networl	k
	of independent partner organizations that promote indiv		n
	and are committed to identifying and removing 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?	XYes	└── No
_	If "Yes," describe these new services on Schedule O.		V
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, a		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	hers, the total expenses, a	and
4-	revenue, if any, for each program service reported. (Code:) (Expenses \$ 10,257,633. including grants of \$ 7,251,884.) (Reve	<u> </u>	125.)
4a	(Code:)(Expenses \$10,257,633. including grants of \$7,251,884.) (Reve COMPETE - Atlas Network offers grant and prize competit		
	our partners' efforts to develop, innovate, and succeed		<u> </u>
		* •	
4b	(Code:) (Expenses \$3, 170, 327. including grants of \$18, 764.) (Reve	enue \$ 186,0	099.)
	CELEBRATE - Atlas Network fosters camaraderie and stoke		
	among our partners by celebrating their greatest accomp	plishments	
	through events and media outreach.		
4c	(Code:) (Expenses \$ 3,121,837. including grants of \$ 1,466,075.) (Reve	anua \$ 36.1	000.)
10	Innovation Labs - Atlas Network is constantly innovatir	ng in differe	
	areas and looking for ways to reach out to our partners		
	developing regional centers, cohorts, events, grants, a		
	research. We explore and identify new areas for our par	rtner's work.	
4d		F 400	
	(Expenses \$ 1,787,563. including grants of \$ 97,595.) (Revenue \$	7,120.)	
4e	Total program service expenses18,337,360.		
		Form 99	90 (2022)

Form	990	(2022)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		v	
~	If "Yes," complete Schedule A	1	X X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		
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		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		
7	during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	· ·		
-	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
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		X
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?			v
10	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40		x
44	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		А
11	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			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	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	X	
	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	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		
IZa	Schedule D. Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
2	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)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b				
	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		37	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		v	
47	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,	17		x
18	column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i> . See instructions Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		<u> </u>
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
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		x
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	

			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	Х	
24a	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			
	Schedule K. If "No," go to line 25a	24a		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?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			37
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	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			x
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			x
~-	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		x
00	entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
а		28a		x
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	20a 28b	х	- 23
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f	200		
C	"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	29		x
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? <i>If</i> "Yes," <i>complete</i>			
	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			
	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	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 on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 47			
b				
С			Х	
	(gambling) winnings to prize winners?	1c	Λ	

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Form	990 (2022) Atlas Economic Research Foundation 94-2763	845	Р	age 5
Pa	t 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 47		37	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	v
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4 -		x
h	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u>л</u>
a	If "Yes," enter the name of the foreign country			
Fo	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50 5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	50		
ou	any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	ou		
-	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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	Х	
	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 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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?	8		
9	Sponsoring organizations maintaining donor advised funds.	-		
a	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:			
a L	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a			
	Gross income from other sources. (Do not net amounts due or paid to other sources against			
b	amounts due or received from them.) 11b			
12a	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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 13b			
с	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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		X
	If "Yes," see the 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.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		

Form	990	(2022)
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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 on 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		100	110
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
2	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	~		
3	of officers, directors, trustees, or key employees to a management company or other person?	3		х
4		4		X
- 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X
-	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X
6 70	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	0		- 23
74		70		х
h	more members of the governing body?	7a		21
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	76		х
~	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		Λ
8		0.	х	
	The governing body?	8a	X	
b	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
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		л
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		V.	N.,
10-		10-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		- 23
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
110	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 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 on Schedule O the process, if any, used by the organization to review this Form 990.	11a		
		12a	х	
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a 12b	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	120		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	10-	х	
40	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13 14	X	
14	Did the organization have a written document retention and destruction policy?	14	Δ	
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?	45.	х	
	The organization's CEO, Executive Director, or top management official	15a	л Х	
b	Other officers or key employees of the organization	15b	~	
40	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10		х
	taxable entity during the year?	16a		л
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	401		
<u> </u>	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, CA, CT, FL, GA, IL, KY	ਅਸ	мт	MN
17 19				
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) for public inspection. Indicate how you made these available. Check all that apply	s only) availa	aDie
	for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain on Schedule O)			
10		d fina		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an statements available to the public during the tax year.	u inal	icidi	
20	Statements available to the public during the tax year. 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, 310, Arlington, VA 22203			

See Schedule O for full list of states

Part VII	Со	npensation of Officers, Directors, Trustees, Key Employees, Highest Compens	ated
	Em	ployees, 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than

List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of

• 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.

See the instructions for the order in which to list the persons above.

(A)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average	(da	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unles	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week		cer an	id a d	recto	or/trus	itee)	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	truste	al trus		yee	mpen		1099-NEC)	1000 NEO)	and related
	below	Individual trustee or director	Institutional trustee	5	Key employee	Highest compensated employee	er			organizations
	line)	Indiv	Instit	Officer	Keye	High empl	Former			
(1) Bradley A. Lips	40.00									
CEO				X				390,828.	0.	57,885.
(2) Chad Goote	40.00									
Chief Development Officer		1			X			358,616.	0.	17,163.
(3) Matt C. Warner	40.00									
President				Х				309,760.	0.	46,999.
(4) Thomas G. Palmer	40.00									
Executive VP					Х			310,052.	0.	18,333.
(5) Lyall J. Swim	40.00									
Chief Innovation Officer					Х			225,540.	0.	43,273.
(6) Katherine Price	40.00									
Chief Operations Officer						Х		148,096.	0.	43,694.
(7) Romulo Lopez	40.00									
Director of Finance						Х		143,754.	0.	44,354.
(8) Christopher J Kinnan	40.00									
Director of Information Sy						Х		137,307.	0.	43,847.
(9) Patty Hohlbein	40.00									
VP of Atlas Network Academy						Х		148,684.	0.	16,528.
(10) Casey Pifer	40.00									
VP of Institute Relations						Х		133,202.	0.	10,331.
(11) Debbi Gibbs	8.00									_
Chairwoman		Х		х				0.	0.	0.
(12) Scott Barbee	4.00									
Vice Chair and Treasurer		X		Х				0.	0.	0.
(13) Lawson Bader	4.00									
Board Member		X						0.	0.	0.
(14) Luis Henrique Ball	4.00									
Board Member		X						0.	0.	0.
(15) Thomas Beach	4.00									
Board Member		X						0.	0.	0.
(16) Robert Boyd	4.00									^
Board Member		Х						0.	0.	0.
(17) Montgomery Brown	4.00								~	~
Board Member		Х						0.	0.	0 .

232007 12-13-22

Form 990 (2022)

Form 990 (2022) Atlas Eco	onomic H	Res	sea	aro	ch	Fc	u	ndation	94-2763	845 Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	, an	d Hi	ghes	st C	Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	(do			ition more) than d	one	Reportable	Reportable	Estimated
	hours per	box	, unles	ss pe	rson	is both	n an	compensation	compensation	amount of
	week		cer an	dad	Irecto	or/trust	ee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	or di	e			ated		organization	(W-2/1099-MISC/	from the
	organizations	ustee	trust		e	bens		(W-2/1099-MISC/	1099-NEC)	organization
	below	ual tr	ional		ploye	t con /ee		1099-NEC)		and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(18) Jean-Claude Gruffat	4.00									
Board Member		Х						0.	0.	0.
(19) Linda Edwards	4.00									
Board Member		х						0.	0.	0.
(20) Nikolaos Monoyios	4.00									
Board Member		х						0.	0.	0.
(21) Parth Shah	4.00							-		
Board Member		х						0.	0.	0.
(22) Kathy Washburn	4.00									
Board Member	4.00	х						0.	0.	0.
(23) Dan Grossman	4.00									
Board Member	7.00	х						0.	0.	0.
(24) Gerry Orhstrom	4.00	Δ						0.	0.	<u>0.</u>
Board Member	4.00	х						0.	0.	0.
Board Member		Δ						0.	0.	0.
41- 0-1-1-1-1								2,305,839.	0.	342,407.
1b Subtotal								2,303,039.	0.	0.
c Total from continuation sheets to Part VI								2,305,839.	0.	342,407.
d Total (add lines 1b and 1c)										542,407.
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed a	bove	e) wh	io r	eceived more than \$100	,000 of reportable	10
compensation from the organization										12 Yes No
										res No
3 Did the organization list any former officer,	,	ee, k	key e	emp	loye	e, or	hig	phest compensated emp	ployee on	- V
line 1a? If "Yes," complete Schedule J for s										3 X
4 For any individual listed on line 1a, is the su			•						the organization	
and related organizations greater than \$150	0,000? If "Yes,	" со	mple	ete S	Sche	edule	e J f	for such individual		4 X
5 Did any person listed on line 1a receive or a	accrue comper	nsat	ion f	rom	i any	unre	elat	ed organization or indiv	idual for services	
rendered to the organization? If "Yes," com	plete Schedule	e J f	or sı	ıch	pers	son .				5 X
Section B. Independent Contractors		1							\$100.000 of a survey of	ation for a
1 Complete this table for your five highest co		•							· ·	ation from
the organization. Report compensation for	the calendar y	eare	enai	ng v	vitri	or w	tnir		year.	(0)
(A) Name and business	address							(B) Description of s	envices ((C) Compensation
Roberto Salinas, Bernardo		<u></u>	<u> </u>	500	<u></u>		-	Description of a		ompensation
-					J			CIA Dimostor		150 000
(25D), La Loma Santa Fe,							_	CLA Director		150,000.
Axel Kayser, Alonso de Mo	onroy z	50		vbi	•			a		100 000
503, Vitacura, CHILE								Senior Fello	w	120,000.
							+			
							╡			

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 2

Pa	rt V	/111									
			Check if Schedule O	conta	ains a resp	onse	or note to any lin	e in this Part VIII	(D)	(A)	
								(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts nts	1	а	Federated campaigns		1a						
Contributions, Gifts, Grants and Other Similar Amounts		b	Membership dues		1b						
s, C			Fundraising events								
Gift		d	Related organizations		1d						
imi,		е	Government grants (conti	ributi	ions) 1e						
er S		f	All other contributions, gifts,								
the			similar amounts not included	d abov	/e 1f		19,127,386.				
ud O		g	Noncash contributions included in	n lines	1a-1f 1g	\$					
aŭ		h	Total. Add lines 1a-1f					19,127,386.			
							Business Code				
ice	2	а	Registrations				900099	192,300.	192,300.		
erv ue		b	Innovation Labs				900099	36,000.	36,000.		
n S /en		С	Publications				900099	6,044.	6,044.		
Program Service Revenue		d									
roç		е									
			All other program service					224 244			
		g	Total. Add lines 2a-2f					234,344.			
	3 Investment income (including dividends, interest other similar amounts)							73,972.			73 072
			other similar amounts)					13,512.			73,972
	4 5				•		F				
	5		Royalties		(i) Rea		(ii) Personal				
	6	2	Gross rents	6a	() 1100						
			Gross rents Less: rental expenses	6b							
			Rental income or (loss)	6c							
			Net rental income or (loss								
			Gross amount from sales of		(i) Secur		(ii) Other				
	-		assets other than inventory	7a							
		b	Less: cost or other basis								
ne			and sales expenses	7b							
Revenue		с	Gain or (loss)								
		d	Net gain or (loss)								
her			Gross income from fundraisi								
Oth			including \$		of						
			contributions reported on	n line	1c). See						
			Part IV, line 18								
			Less: direct expenses								
			Net income or (loss) from								
	9	а	Gross income from gamin								
			Part IV, line 19								
			Less: direct expenses								
			Net income or (loss) from			es					
	10	а	Gross sales of inventory,								
			and allowances								
			Less: cost of goods sold			_					
		С	Net income or (loss) from	sales	s or invent	ory	Business Code				
sno	44	~	Refunds/rebates				900099	10,943.			10,943
Miscellaneous Revenue		a b						10,743.			10,545
ella ver		с С									
Re			All other revenue				<u> </u>				
Σ			Total. Add lines 11a-11d					10,943.			
			Total revenue See instruction					19 446 645.	234 344.	0.	84 915

232009 12-13-22

Form 990 (2022)

94-2763845

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respon	so or poto to any lino in	this Part IV		
	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
	and domestic governments. See Part IV, line 21	2,448,343.	2,448,343.		
0		2,110,515.	2,110,515.		
2	Grants and other assistance to domestic	3,666.	3,666.		
-	individuals. See Part IV, line 22	5,000.	5,000.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	6,382,308.	6 202 200		
	individuals. See Part IV, lines 15 and 16	0,302,300.	6,382,308.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1 770 440	1 1 5 0 1 5 5	225 200	
	trustees, and key employees	1,778,449.	1,150,155.	235,289.	393,005.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)			240.014	
7	Other salaries and wages	2,570,009.	1,662,070.	340,014.	567,925.
8	Pension plan accruals and contributions (include	CO 040	44 04-		
	section 401(k) and 403(b) employer contributions)	63,810.	41,267.	8,442.	14,101.
9	Other employee benefits	299,527.	193,709.	39,628.	66,190.
10	Payroll taxes	265,122.	171,459.	35,076.	58,587.
11	Fees for services (nonemployees):				
а	Management				
b	Legal	56,476.	51,937.	741.	3,798.
с	Accounting	118,385.		118,385.	
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
	column (A), amount, list line 11g expenses on Sch 0.)	951,166.	872,792.	12,799.	65,575.
12	Advertising and promotion	383,918.	315,105.	23,842.	44,971.
13	Office expenses	497,447.	398,912.	40,834.	57,701.
14	Information technology	488,184.	382,484.	44,522.	61,178.
15	Royalties				
16	Occupancy	279,551.	244,766.	13,140.	21,645.
17	Travel	917,085.	870,311.	5,082.	41,692.
18	Payments of travel or entertainment expenses			-	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,075,998.	2,919,112.	17,046.	139,840.
20	Interest	•			-
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	161,857.	146,222.	5,905.	9,730.
23	Insurance	30,102.	17,921.	10,985.	1,196.
24	Other expenses. Itemize expenses not covered		,		,
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
~	amount, list line 24e expenses on Schedule 0.) Dues/subscriptions	55,500.	41,562.	734.	13,204.
a b	<u></u>	20,182.	11,791.	1,183.	7,208.
0	License/permits	10,781.	8,073.	143.	2,565.
C		4,534.	3,395.	60.	1,079.
d				• • •	±,013•
	All other expenses	20,862,400.	18,337,360.	953,850.	1,571,190.
25	Total functional expenses. Add lines 1 through 24e	40,004,400.	10,337,300.	• 000,000	±,J/±,±90•
26	Joint costs. 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)				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2022)

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		Check if Schedule O contains a response or not	te to an	v line in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			2,076,989.	1	3,287,612.
	2	Savings and temporary cash investments			8,377,088.	2	6,287,911.
	3	Pledges and grants receivable, net			5,372,925.	3	4,496,145.
	4	Accounts receivable, net			16,471.	4	14,856.
	5	Loans and other receivables from any current o				-	
	-	trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the				5	
	6	Loans and other receivables from other disquali	-				
		under section 4958(f)(1)), and persons describe				6	
s	7	Notes and loans receivable, net		F		7	
Assets	8	Inventories for sale or use				8	
As	9				421,548.	9	103,792.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	920,021.			
	b	Less: accumulated depreciation	10b	439,483.	575,433.	10c	480,538.
	11	Investments - publicly traded securities			2,947.	11	5,852.
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets			278,621.	14	251,091.
	15	Other assets. See Part IV, line 11		62,016.	15	1,892,765.	
	16	Total assets. Add lines 1 through 15 (must equ			17,184,038.	16	16,820,562.
	17	Accounts payable and accrued expenses		617,909.	17	278,792.	
	18	Grants payable	872,105.	18	496,653.		
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
es	22	Loans and other payables to any current or form	ner offic	cer, director,			
ilit.		trustee, key employee, creator or founder, subs	tantial	contributor, or 35%			
Liabilities		controlled entity or family member of any of the	se pers	ons		22	
-	23	Secured mortgages and notes payable to unrela		F		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). Complete Part X	706 700		0 4 6 4 0 1 7
		of Schedule D			706,722.		2,464,917.
	26	Total liabilities. Add lines 17 through 25		77	2,196,736.	26	3,240,362.
S		Organizations that follow FASB ASC 958, che	eck her	e 🖾			
nce	07	and complete lines 27, 28, 32, and 33.			4,630,783.	07	3,493,065.
ala	27				10,356,519.	27	10,087,135
Ыd	28	Net assets with donor restrictions			10,330,319.	28	10,007,133
Fur		Organizations that do not follow FASB ASC 9	58, ch				
o	00	and complete lines 29 through 33.				00	
ets	29	Capital stock or trust principal, or current funds				29	
Ass	30	Paid-in or capital surplus, or land, building, or ed		F		30 31	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in			14,987,302.	31 32	13,580,200.
z	32	Total net assets or fund balances			17,184,038.	32	16,820,562
	33	Total liabilities and net assets/fund balances			±,,±0±,050•	აა	

12

Part X | Balance Sheet

Form	990	(2022)
	000	

Form	1990 (2022) Atlas Economic Research Foundation	94-2	2763845	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	19,44		
2	Total expenses (must equal Part IX, column (A), line 25)	2	20,86		
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,41		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	14,98		
5	Net unrealized gains (losses) on investments	5		8,6	553.
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 on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	13,58	0,2	:00.
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 on Schedule				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	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	X	
	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:				
	X 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	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl	nedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audi	t		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2022)

(Form 990)

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.

OMB No. 1545-0047
2022
Open to Public Inspection

Department of the Treasury Internal Revenue Service					ttach to Form 990 or Fo Form990 for instruction			formation.	Open to Public Inspection				
Nam	e of t	the organizati		<u> </u>					Employer	identification number			
					Research Fo					4-2763845			
Pa	rt I	Reason	for Public (Charity Status.	(All organizations must o	omplete t	his part.) S	ee instruction	ıs.				
	organ				(For lines 1 through 12, o								
1					on of churches describe		on 170(b)(*	1)(A)(i).					
2	\square				Attach Schedule E (Forr								
3	\square	•	•		anization described in so			•					
4				ation operated in co	njunction with a hospita	l describe	u in sectio	n 170(a)(1)(A	.)(III). Enter	the hospital's name,			
5		city, and stat	-	or the benefit of a co	ollege or university owne	d or opera	ted by a d	overnmental	unit describ	ed in			
5		-	-	Complete Part II.)	nege of university owne		led by a g	ovenimentar					
6					mental unit described in	section 17	70(b)(1)(A)	(v).					
7	X				antial part of its support				the general	public described in			
				omplete Part II.)					..				
8					(1)(A)(vi). (Complete Par	t II.)							
9		An agricultur	al research org	ganization described	l in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college			
		or university	or a non-land-o	grant college of agric	culture (see instructions)	Enter the	name, city	y, and state o	f the colleg	e or			
		university:											
10		An organizati	on that norma	Illy receives (1) more	than 33 1/3% of its sup	port from	contributio	ons, members	hip fees, a	nd gross receipts from			
					ct to certain exceptions;								
					e (less section 511 tax) fr	om busine	esses acqu	ired by the o	rganization	after June 30, 1975.			
				mplete Part III.)	San ha da an da sa da baran da Barana	(-h. 0		0(-)(4)					
11 12	H	-	-	-	ively to test for public satively for the benefit of, to	-			orn out the	nurnesses of one or			
12					ed in section 509(a)(1) o								
					of supporting organization								
а					supervised, or controlled					aivina			
					gularly appoint or elect								
				complete Part IV, Se									
b		-			d or controlled in connec	tion with it	ts support	ed organizatio	on(s), by ha	ving			
		control or r	nanagement o	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	ported			
	_	organizatio	n(s). You mus	t complete Part IV,	Sections A and C.								
с		Type III fur	nctionally inte	grated. A supportin	g organization operated	in connec	tion with, a	and functiona	Illy integrate	ed with,			
		its support	ed organizatio	n(s) (see instructions	s). You must complete	Part IV, Se	ections A,	D, and E.					
d			-		porting organization oper				-				
			-		zation generally must sa	-		-	d an attent	iveness			
_		- ·	•	,	nplete Part IV, Section				U. T				
e			0		written determination fro mally integrated support			а туре ї, турє	e II, Type III				
f	Ento		•		, , , , , , , , , , , , , , , , , , , ,	0 0	zation.						
q			• •	n about the supporte	ed organization(s)								
		i) Name of supp		(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount o	f monetary	(vi) Amount of other			
		organizatior	ı		(described on lines 1-10 above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions)			
Tota	I												

Schedule A (Form 990) 2022Atlas Economic Research Foundation94-2763845Page 2Part IISupport Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	15,319,187.	15,037,833.	15,163,761.	17,626,501.	19,668,112.	82,815,394.
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	15,319,187.	15,037,833.	15,163,761.	17,626,501.	19,668,112.	82,815,394.
	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)						30,048,444.
6	Public support. Subtract line 5 from line 4.						52,766,950.
	ction B. Total Support						, , -
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	15,319,187.	15,037,833.	15,163,761.	17,626,501.	19,668,112.	82,815,394.
	Gross income from interest,	, , , -	, , , -	, , -	, , , -	, , -	, , ,
Ũ	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	55,469.	98,205.	73,079.	78,987.	73,972.	379,712.
٩	Net income from unrelated business						••••
5	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	58,884.	9,000.	11.053.	497,150.	46,943.	623,030.
11	Total support. Add lines 7 through 10	0070011	570001	,	15771000	1075101	83,818,136.
	Gross receipts from related activities,	etc. (see instructio				12	563,243.
	First 5 years. If the Form 990 is for th	,	,	fourth or fifth tax			
10	organization, check this box and stop	-	st, second, trind,		year as a section c	01(0)(0)	
Sec	ction C. Computation of Publi		rcentage				
	Public support percentage for 2022 (I			column (f))		14	62.95 %
	Public support percentage from 2021					15	62.02 %
	33 1/3% support test - 2022. If the c						
	stop here. The organization qualifies	-					v
b	33 1/3% support test - 2021. If the c		-				
-	and stop here. The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances te			-		-	
h	10% -facts-and-circumstances test	-		• • • •		I7a and line 15 is	
	more, and if the organization meets th	•					1070 01
	organization meets the facts-and-circu						
18	Private foundation. If the organizatio		•				
-10	- mate roundation. If the organizatio	in all hot check a		a, 100, 17a, 01 17k			·

Schedule A (Form 990) 2022

Schedule A	(Form 990)) 2022	Atlas	Economic	Research	Foundation
Part III	Support	Schedule f	or Organiz	zations Descri	bed in Sectior	າ 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	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(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						
Ũ	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
10	3 received from disqualified persons						
r	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						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2010	(a) 2020	(d) 2021	(a) 2022	(f) Total
	,	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
100	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
Ľ	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 on 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.)	L					
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organiz	ation,
	check this box and stop here						
	ction C. Computation of Publ						
15	Public support percentage for 2022 (line 8, column (f), d	divided by line 13,	column (f))		15	%
16	Public support percentage from 2021					16	%
Se	ction D. Computation of Inve		`				
17	Investment income percentage for 20)22 (line 10c, colur	mn (f), divided by li	ine 13, column (f))		17	%
18	Investment income percentage from	2021 Schedule A,	Part III, line 17			18	%
19a	a 33 1/3% support tests - 2022. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3% , and lin	e 17 is not
	more than 33 1/3%, check this box a	nd stop here. The	organization quali	fies as a publicly s	supported organization	ation	
k	33 1/3% support tests - 2021. If the	organization did r	not check a box or	n line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%	6, and
	line 18 is not more than 33 1/3%, che	eck this box and st	t op here. The orga	nization qualifies a	as a publicly supp	orted organizatio	n
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check ti	his box and see in	structions	

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b. Part I. complete Sections A and C. If you checked box 12c. Part I. complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c 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 box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 on 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 on 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 line 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.)

Schedule A (Form 990) 2022 Atlas Economic Research Foundation 94-2763845 Page 5 Part IV Supporting Organizations (continued) Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? Image 1 Image 1 a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? Image 1 Image 1 b A family member of a person described on line 11a above? Image 1 Image 1 Image 1 c A 35% controlled entity of a person described on line 11a or 11b above?//f "Yes" to line 11a, 11b, or 11c, provide Image 1 Image 2 Image 3 Image 3<

Section B. Type I Supporting Organizations

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> "No," <i>describe in</i> Part VI <i>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 officers, directors, or trustees were allocated among the</i>		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	
0	Did the experimentation expected for the bandit of any supported experimentation other than the supported		

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.
Section C. Type II Supporting Organizations

Section	. Type it s	supporting	Organiza	110115		

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	

Section D. All Type III Supporting Organization	IS
---	----

			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 on line 2, above, 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		

Section 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).
- a 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.*
- c _____ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a 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.
- b Did the activities described on line 2a, above, 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.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**
- a 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? *If* "Yes" or "*No*" provide details in **Part VI.**
- **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.*

2a

2b

3a

Yes No

Yes No

Yes No

2

Part V		Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations
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.
		All other Type III non-functionally integrated supporting organizations must complete 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 Part VI):			
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 0.015 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 0.035.	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 0.85 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-functiona	lly integrate	ed Type III supporting org	anization (see

instructions).

Schedule A (Form 990) 2022

Schedule A	(Form 990)) 2022
Part V	Type III	Non-Funct

Atlas E	conomic	Research	Foundation	
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Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continu	ied)					
Section D - Distributions Current Yes 1 Amounts paid to supported organizations to accomplish exempt purposes 1									
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1					
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported							
	organizations, in excess of income from activity			2					
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	IS	3					
4	Amounts paid to acquire exempt-use assets			4					
5	Qualified set-aside amounts (prior IRS approval required - pro		5						
6	Other distributions (describe in Part VI). See instructions.		6						
7	Total annual distributions. Add lines 1 through 6.			7					
8	Distributions to attentive supported organizations to which the	he organization is responsive	9						
	(provide details in Part VI). See instructions.			8					
9	Distributable amount for 2022 from Section C, line 6			9					
10	Line 8 amount divided by line 9 amount			10					
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	าร	(iii) Distributable Amount for 2022				
1	Distributable amount for 2022 from Section C, line 6								
2	Underdistributions, if any, for years prior to 2022 (reason-								
	able cause required - explain in Part VI). See instructions.								
3	Excess distributions carryover, if any, to 2022								
а	From 2017								
b	From 2018								
c	From 2019								
d	From 2020								
e	From 2021								
f	Total of lines 3a through 3e								
g	Applied to underdistributions of prior years								
h	Applied to 2022 distributable amount								
i	Carryover from 2017 not applied (see instructions)								
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.								
4	Distributions for 2022 from Section D,								
	line 7: \$								
a	Applied to underdistributions of prior years								
b	Applied to 2022 distributable amount								
c	Remainder. Subtract lines 4a and 4b from line 4.								
5	Remaining underdistributions for years prior to 2022, if								
	any. Subtract lines 3g and 4a from line 2. For result greater								
	than zero, explain in Part VI. See instructions.								
6	Remaining underdistributions for 2022. Subtract lines 3h								
	and 4b from line 1. For result greater than zero, explain in								
	Part VI. See instructions.								
7	Excess distributions carryover to 2023. Add lines 3j								
	and 4c.								
8	Breakdown of line 7:								
a	Excess from 2018								
b	Excess from 2019								
C	Excess from 2020								
d	Excess from 2021								
е	Excess from 2022								

Schedule A	(Form 990) 2022	Atlas	Economic	Researc	h Foundatio	on 94-2	763845	Pane 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D, Section D, lines 5, 6, and (See instructions.)	mation. Pro , 2, 3b, 3c, 4b lines 2 and 3;	ovide the explan o, 4c, 5a, 6, 9a, 9 Part IV, Sectior	hations required b 9b, 9c, 11a, 11b, a n E, lines 1c, 2a, 2	y Part II, line 10; Part and 11c; Part IV, Sec b, 3a, and 3b; Part V	II, line 17a or 17b; Par tion B, lines 1 and 2; P , line 1; Part V, Section	t III, line 12; art IV, Section B, line 1e; Par	С,

223451 11-15-22

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Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047 2022

Employer identification number

Internal Revenue Service

Name of the organization

	Atlas Economic Research Founda	ation 94	-2763845
Organization type (che	c one):		
Filers of:	Section:		
Form 990 or 990-EZ	$\fbox{3}$ 501(c)(3) (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treate	ed as a private foundation	
	527 political organization		
Form 990-PF	501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as	s 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

X 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), 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), 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 certify that it doesn't meet the filing requirements of Schedule B (Form 990).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2022)

Schedule B (Form 990)

Department of the Treasury

5

(a)

No.

6

Schedule	B (Form 990) (2022)		Page
Name of o	rganization	En	ployer identification number
Atlas	Economic Research Foundation		94-2763845
Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> 1</u>		\$5,112,350	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$2,251,124	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
3		\$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
4		\$500,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

(b)

Name, address, and ZIP + 4

> Person Payroll

Noncash

Person Payroll

Noncash

(Complete Part II for

(Complete Part II for noncash contributions.)

(d)

Type of contribution

1,124,086.

955,000.

(c)

Total contributions

\$

\$

X

X

noncash contributions.)

23

Schedule B (Form 990) (2022)

		_

	\$410,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(b)	(c)	(d)
Name, address, and ZIP + 4	Total contributions	Type of contribution
	\$	Person Payroll On Complete Part II for noncash contributions.)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		Person

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(b)

Name, address, and ZIP + 4

Employer identification number

(d)

Type of contribution

X

X

X

94-2763845

Person Payroll

Noncash

Person Payroll

Noncash

Person Payroll

Noncash

(Complete Part II for noncash contributions.)

(d)

Type of contribution

(Complete Part II for noncash contributions.)

(d)

Type of contribution

(Complete Part II for noncash contributions.)

(d)

Type of contribution

(c)

Total contributions

(c)

Total contributions

(c)

Total contributions

(c)

Total contributions

\$

\$

\$

570,000.

500,000.

500,000.

Schedule B (Form 990) (2022)

Payroll Noncash (Complete Part II for noncash contributions.)

Schedule	В	(Form	990)	(2022))

Name of organization

Part I

(a)

No.

(a)

No.

(a)

No.

(a)

No.

10

(a) No.

(a)

No.

9

8

7

Employer identification number

94-2763845

Atlas Economic Research Foundation

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

	Noncash Property (see instructions). Use duplicate copies of Pa		1
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_			
		\$	
(a) No. irom 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. rom 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
		\$	

Schedule E	B (Form 990) (2022)			Page 4
Name of o	rganization		Employe	er identification number
Atlas	Economic Research Foun	dation	94-	2763845
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a)	ions to organizations described in se	ction 501(c)(7), (8), or (10) that total m	
	completing Part III, enter the total of exclusively religious, o	charitable, etc., contributions of \$1,000 or le	ess for the year. (Enter this info. once.) \$	
(a) No.	Use duplicate copies of Part III if additional	space is needed.	<u> </u>	
from Part I	(b) Purpose of gift (c) Use of gift		(d) Description of	f how gift is held
			— ———	
Ī		(e) Transfer of gift		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to	o transferee
(a) No. from Part I	(b) Purpose of gift (c) Use of		(d) Description of	f how gift is held
			— ———	
Ī		(e) Transfer of gift	·	
	Transferee's name, address, a	nd 7IP + 4	Relationship of transferor to	transferee
Ī				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of	f how gift is held
Part I				
ł		e) Transfer of gift		
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to	o transferee
(a) No. from				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of	f how gift is held
			— ———	
-				
		(e) Transfer of gift		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to	o transferee
[
		[

Department of the Treasury Internal Revenue Service

(Form	990)
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232051 09-01-22

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.



Name of the organization

Atlas Economic Research Foundation

Employer identification number 94-2763845

Pa			s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, li		
		(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	-	
	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor		
	for charitable purposes and not for the benefit of the donor		
Do			
Pa		-	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organiza		
	Preservation of land for public use (for example, recre		a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
•	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual day of the tax year.	ified conservation contribution in the form	Held at the End of the Tax Year
	Total number of conservation easements		
b	Number of conservation easements on a certified historic st		
	Number of conservation easements included in (c) acquired		
u	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
Ū	year	cleased, extinguished, or terminated by th	
4	Number of states where property subject to conservation ea	asement is located	
5	Does the organization have a written policy regarding the pe		
•	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
			<u> </u>
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing conserva	ation easements during the year
8	Does each conservation easement reported on line 2(d) abo	ove satisfy the requirements of section 170	0(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conserva-	tion easements in its revenue and expense	e statement and
	balance sheet, and include, if applicable, the text of the foot	tnote to the organization's financial statem	ents that describes the
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections of		other Similar Assets.
	Complete if the organization answered "Yes" on Forr		
1a	If the organization elected, as permitted under FASB ASC 9		
	of art, historical treasures, or other similar assets held for pu		
	service, provide in Part XIII the text of the footnote to its fina		
b	If the organization elected, as permitted under FASB ASC 9	· · · ·	
	art, historical treasures, or other similar assets held for public	ic exhibition, education, or research in furt	herance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
_			
2	If the organization received or held works of art, historical tr		al gain, provide
	the following amounts required to be reported under FASB.		•
	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instruction	ns for Form 990.	Schedule D (Form 990) 2022

	dule D (Form 990) 2022 Atlas E t III Organizations Maintaining C	conomic Re Collections of A								D Page 2
3	Using the organization's acquisition, accessi									
	collection items (check all that apply):			-	-		-			
а	Public exhibition	c	1 🗆 L	oan or excl	hange progra	am				
b	Scholarly research	e	• 🗆 d	Other						
с	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explai	in how th	ey further tl	he organizatio	on's exen	npt purpo	se in Par	t XIII.	
5	During the year, did the organization solicit of	or receive donations	of art, his	torical trea	sures, or othe	er similar	assets		-	
	to be sold to raise funds rather than to be m								Yes	No No
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa	•	ete if the	organizatio	n answered "	'Yes" on	Form 990	, Part IV,	line 9, or	
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for c	ontribution	is or other as	sets not i	included			
	on Form 990, Part X?								Yes	🗌 No
b	If "Yes," explain the arrangement in Part XIII									
									Amount	
с	Beginning balance						. 1c			
d	Additions during the year						. 1d			
е	Distributions during the year						. 1e			
	Ending balance								_	
	Did the organization include an amount on F								Yes	No No
	If "Yes," explain the arrangement in Part XIII.									
Par	t V Endowment Funds. Complete i		1					ooro book	(a) Four	vaara baak
		(a) Current year	(D) Pr	ior year	(c) Two year	S DACK (a) mee y	Ears Dack	(e) roui	years Dack
	Beginning of year balance									
	Contributions									
	Net investment earnings, gains, and losses									
	Grants or scholarships									
е	Other expenditures for facilities									
f	and programs									
	Administrative expenses End of year balance									
g 2	Provide the estimated percentage of the cur		l ce (line 1c	n column (s)) held as:					
	Board designated or quasi-endowment		%	y, column (e	<i>i))</i> field as.					
	Permanent endowment	%								
		<u></u> /°								
	The percentages on lines 2a, 2b, and 2c sho	•								
3a	Are there endowment funds not in the posse	•	ation that	t are held a	nd administe	red for th	ne			
	organization by:	C C							Г	Yes No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requi	red on So	chedule R?					3b	
	Describe in Part XIII the intended uses of the	e organization's endo	owment f	unds.						
Par	t VI Land, Buildings, and Equipm	nent.								
	Complete if the organization answere	d "Yes" on Form 99	0, Part IV	, line 11a. S	See Form 990), Part X, I	line 10.			
	Description of property	(a) Cost or c			or other		cumulate	d	(d) Book	value
		basis (investr	ment)	basis	(other)	dep	reciation			
	Land									
	Buildings				E 200		17 7		400	040
	Leasehold improvements				5,398.		17,35			3,042.
	Equipment			19	4,623.	1	.22,12	4/•	12	2,496.
-	Other		V aal	(D) 1: 1					190	,538.
TOLA	. Add lines 1a through 1e. (Column (d) must e	quai i 01111 990, Parl	л, coium	ו שווו (ם) וו						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-vear market value
(1)			
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
(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 000 Part IV line	11d Soo Form 990 Part V line 15	
	Description		(b) Book value
	Description		62,016.
	mating loago		1,830,749.
	rating rease		1,030,749.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	ə 15.)		1,892,765.
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	The or This See Form 990, Part X, line 25.	
1.(a) Description of liability			(b) Book value
(1) Federal income taxes	<u>+</u>		
(2) Lease liabilities - opera	ting		
₍₃₎ leases			2,464,917.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			0 161 015
Total. (Column (b) must equal Form 990, Part X, col. (B) line			2,464,917.
2. Liability for uncertain tax positions. In Part XIII, provide			
organization's liability for uncertain tax positions under	FASB ASC 740. Check he	ere if the text of the footnote has been pro	ovided in Part XIII X

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

Schedule D (Form 990) 2022

94-2763845 Page 3

Schedule D (Form 990) 2022

Part VII Investments - Other Securities.

94-2763845	Page 4
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Dent VI		- (D			A STATE AND A STAT	F
Schedule D (F	Form 990) 2022	Atlas	Economic	Research	Foundation	

Pa	rt XI Reconciliation of Revenue per Audited Financial Staten		Revenue per R	eturi	า.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Total revenue, gains, and other support per audited financial statements			1	19,996,024.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	8,653.		
b	Donated services and use of facilities	2 b	540,726.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	549,379.
3	Subtract line 2e from line 1			3	19,446,645.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			_
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	19,446,645.
Do	rt VII Decenciliation of Expanses per Audited Einensial State	~~ ~ ~ + ~ \\/:+	h Evnanaaa nar		
Га	rt XII Reconciliation of Expenses per Audited Financial State	nents wit	n Expenses per	Retu	irn.
Fd	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.	· · ·		
1		a.	· · ·	кец 1	rn. 21,403,126.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements	a.	· · ·		
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	a. 2a			
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	a. 2a 2b			
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	a. 2a			21,403,126.
1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	a. 2a 2b 2c 2d	540,726.		21,403,126.
1 2 b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	a. 2a 2b 2c 2d	540,726.	1	21,403,126.
1 2 b c d e	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	a. 2a 2b 2c 2d	540,726.	1 2e	21,403,126.
1 2 b c d e 3	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	a. 2a 2b 2c 2d	540,726.	1 2e	21,403,126.
1 2 b c d 3 4	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	a. 2a 2b 2c 2d 2d	540,726.	1 2e	21,403,126. 540,726. 20,862,400.
1 2 a b c d e 3 4 a	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b	a. 2a 2b 2c 2d 2d 4a 4b	540,726.	1 2e 3 4c	21,403,126. 540,726. 20,862,400. 0.
1 2 d e 3 4 b c 5	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	a. 2a 2b 2c 2d 2d 4a 4b	540,726.	1 2e 3	21,403,126. 540,726. 20,862,400.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part 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 additional information.

Part X, Line 2:

Management ha	s evaluated	the	Organization'	s	tax	positions	and	concluded
---------------	-------------	-----	---------------	---	-----	-----------	-----	-----------

that the financial statements do not include any uncertain tax positions.

Name of the organization					Employer ident	ification number
Atlas Economic	Research	Foundat	ion		94-27638	45
Part I General Info	rmation on A	Activities Ou	tside the United States. Comple	te if the orgar	nization answered	"Yes" on
Form 990, Part IV						
•	•		ds to substantiate the amount of its gra			
the grantees' eligibility f	or the grants or a	assistance, and	the selection criteria used to award the	grants or ass	istance?	Yes No
2 For grantmakers. Desc	vriba in Dart V th	o organization's	procedures for monitoring the use of its	aranta and a	thar appintance of	utaida tha
2 For grantmakers. Desc United States.		e organization s	procedures for monitoring the use of its	s grants and o	assistance ou	
	he following Par	t I. line 3 table c	an be duplicated if additional space is n	leeded.)		
(a) Region	(b) Number of	(c) Number of			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 recipients located in the region)		e specific type (s) in the region	investments
		in the region				in the region
Central America and			Grants to recipients			
the Caribbean	0	0	located in region			108,922.
East Asia and the			Grants to recipients			
Pacific	0	0	located in region			292,002.
Europe (Including			Grants to recipients			
Iceland & Greenland)	0	0	located in region			1,225,052.
Middle East and						
North Africa	0	0	Grants to recipients located in region			184,324.
	, · · · · · · · · · · · · · · · · · · ·					101,521
North America -			Grants to recipients			
Canada and Mexico	0	0	located in region			439,254.
Russia and			Grants to recipients			
Neighboring States	0	0	located in region			1,827,554.
Couth America			Grants to recipients			1 077 706
South America	0	0	located in region			1,277,726.
			Grants to recipients			
South Asia	0	0	located in region			535,109.
3 a Subtotal	0	() 			5,889,943.
b Total from continuation						1 067 845
sheets to Part I c Totals (add lines 3a		· · · · · · · · · · · · · · · · · · ·				1,067,845.
and 3b)	0	:	3			6,957,788.

Statement of Activities Outside the United States 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.

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

Schedule F (Form 990) 2022

OMB No. 1545-0047

Open to Public

Inspection

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Schedule F (Form 990) Part I Continuati	Atlas Ec	onomic R	esearch Foundation n. (Schedule F (Form 990), Part I, line 5	94-27638	45 Page
(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 expenditure for region
Sub-Saharan Africa	c		Grants to recipients located in region		492,36
North America	C	1	Program service	Part of the Center for Latin America	150,00
South America	C	1	Program service	Part of the Center for Latin Amer	120,00
East Asia and the Pacific	C	1	Program service	International program	305,48
Fotals		3			1,067,84

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						
		- Antigua &						
		Barbuda, Aruba,	Economic Education	20,708.	Wire	Ο.		
		Central America						
		and the Caribbean						
		- Antigua &						
		Barbuda, Aruba,	Economic Education	25,000.	Wire	Ο.		
		Central America						
		and the Caribbean						
		- Antigua &						
		Barbuda, Aruba,	Economic Education	38,000.	Wire	Ο.		
		Central America						
		and the Caribbean						
		- Antigua &						
		Barbuda, Aruba,	Economic Education	6,809.	Wire	Ο.		
		Central America						
		and the Caribbean						
		- Antigua &						
		Barbuda, Aruba,	Economic Education	12,980.	Wire	Ο.		
		East Asia and the						
		Pacific -						
		Australia,						
		Brunei, Burma,	Economic Education	7,000.	Wire	Ο.		
		East Asia and the						
		Pacific -						
		Australia,						
		Brunei, Burma,	Economic Education	7,500.	Wire	Ο.		
		East Asia and the						
		Pacific -						
		Australia,						
		· ·	Economic Education	10,000.	Wire	Ο.		
2 Enter total number of		, ,	recognized as charities by the	,		I		1
			or counsel has provided a sec			►		140
						•		(

Schedule F (Form 990) 2022

Atlas Economic Research Foundation

94-2763845

	of Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States	. (Schedule F (Form 9			i
l 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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		East Asia and the						
		Pacific -						
		Australia,						
		Brunei, Burma,	Economic Education	105,368.	Wire	٥.		
		East Asia and the						
		Pacific -						
		Australia,						
		Brunei, Burma,	Economic Education	22,829.	Wire	0.		
		East Asia and the						
		Pacific -						
		Australia,						
		Brunei, Burma,	Economic Education	35,000.	Wire	0.		
		East Asia and the						
		Pacific -						
		Australia,						
		Brunei, Burma,	Economic Education	10,150.	Wire	٥.		
		East Asia and the						
		Pacific -						
		Australia,						
		Brunei, Burma,	Economic Education	20,000.	Wire	٥.		
		East Asia and the						
		Pacific -						
		Australia,						
		Brunei, Burma,	Economic Education	17,500.	Wire	٥.		
		East Asia and the						
		Pacific -						
		Australia,						
		Brunei, Burma,	Economic Education	25,000.	Wire	٥.		
		East Asia and the						
		Pacific -						
		Australia,						
		Brunei, Burma,	Economic Education	26,300.	Wire	0.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	10,770.	Wire	٥.		

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Part II Continuation of	of Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form §	90), Part II, line 1)	- i
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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	15,000.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	20,000.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	10,500.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	7,000.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	15,000.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	10,336.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	231,022.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	7,500.	Wire	Ο.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra	Economic Education	8,000.	Wire	٥.		

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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 S	90), Part II, line 1)	- i
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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	14,000.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	26,000.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	45,000.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	10,800.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	6,000.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	21,050.	Wire	0.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	77,550.	Wire	0.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	52,689.	Wire	0.		
		Europe (Including		,				
		Iceland &						
		Greenland) -						
		Albania, Andorra	Economic Education	10,000.	Wire	0.		

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	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9			i
I 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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	22,700.	Wire	0.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	27,920.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	17,600.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	41,500.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	68,500.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	19,000.	Wire	ο.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	59,000.	Wire	ο.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	56,094.	Wire	ο.		
	1	Europe (Including		, ,				
		Iceland &						
		Greenland) -						
			Economic Education	5,500.	Wire	0.		

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Part II Continuation o	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	Schedule F (Form S	90), Part II, line 1)	- i
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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM) appraisal, other)
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	16,500.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	7,500.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	9,100.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	21,160.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	131,511.	Wire	٥.		
		Europe (Including						
		Iceland &						
		Greenland) -						
		Albania, Andorra,	Economic Education	14,474.	Wire	0.		
		Middle East and						
		North Africa -						
		Algeria, Bahrain,						
		Djibouti, Egypt,	Economic Education	45,000.	Wire	٥.		
		Middle East and						
		North Africa -						
		Algeria, Bahrain,						
		Djibouti, Egypt,	Economic Education	88,000.	Wire	Ο.		
		Middle East and		, ,				
		North Africa -						
		Algeria, Bahrain,						
		1 · · ·	Economic Education	11,324.	Wire	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	90), Part II, line 1)	-
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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM ^V appraisal, other)
		Middle East and						
		North Africa -						
		Algeria, Bahrain,						
		Djibouti, Egypt,	Economic Education	20,000.	Wire	٥.		
		Middle East and						
		North Africa -						
		Algeria, Bahrain,						
			Economic Education	20,000.	Wire	٥.		
		North America -						
		Canada and						
		Mexico, but not						
			Economic Education	49,740.	Wire	٥.		
		North America -						
		Canada and						
		Mexico, but not						
		the United States	Economic Education	47,400.	Wire	0.		
		North America -						
		Canada and						
		Mexico, but not						
		· ·	Economic Education	33,903.	Wire	0.		
		North America -						
		Canada and						
		Mexico, but not						
			Economic Education	12,892.	Wire	٥.		
		North America -						
		Canada and						
		Mexico, but not						
			Economic Education	115,000.	Wire	0.		
		North America -		,				
		Canada and						
		Mexico, but not						
		· ·	Economic Education	73,487.	Wire	0.		
		North America -		,				
		Canada and						
		Mexico, but not						
		· ·	Economic Education	57,268.	Wire	0.		

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	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	. (Schedule F (Form 9			
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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		North America -						
		Canada and						
		Mexico, but not						
		the United States	Economic Education	12,500.	Wire	٥.		
		North America -						
		Canada and						
		Mexico, but not						
		the United States	Economic Education	23,606.	Wire	٥.		
		North America -						
		Canada and						
		Mexico, but not						
		the United States	Economic Education	10,958.	Wire	٥.		
		Russia and						
		Neighboring						
		States - Armenia,						
		Azerbijan,	Economic Education	85,500.	Wire	٥.		
		Russia and						
		Neighboring						
		States - Armenia,						
		Azerbijan,	Economic Education	194,558.	Wire	٥.		
		Russia and						
		Neighboring						
		States - Armenia,						
		Azerbijan,	Economic Education	46,000.	Wire	٥.		
		Russia and						
		Neighboring						
		States - Armenia,						
		Azerbijan,	Economic Education	24,952.	Wire	0.		
		Russia and						
		Neighboring						
		States - Armenia,						
		, Azerbijan,	Economic Education	129,077.	Wire	Ο.		
		Russia and						
		Neighboring						
		States - Armenia,						
		, Azerbijan,	Economic Education	154,898.	Wire	0.		

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Part II Continuation of	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 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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
		Russia and						
		Neighboring						
		States - Armenia,						
		Azerbijan,	Economic Education	26,650.	Wire	٥.		
		Russia and						
		Neighboring						
		States - Armenia,						
		Azerbijan,	Economic Education	12,025.	Wire	٥.		
		Russia and						
		Neighboring						
		States - Armenia,						
		Azerbijan,	Economic Education	65,000.	Wire	٥.		
		Russia and						
		Neighboring						
		States - Armenia,						
		Azerbijan,	Economic Education	9,213.	Wire	٥.		
		Russia and						
		Neighboring						
		States - Armenia,						
		Azerbijan,	Economic Education	150,000.	Wire	ο.		
		Russia and						
		Neighboring						
		States - Armenia,						
		, Azerbijan,	Economic Education	357,898.	Wire	٥.		
		Russia and						
		Neighboring						
		States - Armenia,						
		, Azerbijan,	Economic Education	566,250.	Wire	0.		
		South America -		,				
		Argentina,						
		Bolivia, Brazil,						
		, Chile, Columbia,	Economic Education	25,550.	Wire	٥.		
		South America -			1			
		Argentina,						
		Bolivia, Brazil,						
			Economic Education	83,000.	Wire	0.		

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Part II Continuation of	f Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	()	
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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	13,050.	Wire	0.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	12,480.	Wire	Ο.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	10,000.	Wire	Ο.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	10,310.	Wire	Ο.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	20,000.	Wire	Ο.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	40,000.	Wire	Ο.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	22,955.	Wire	Ο.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	7,600.	Wire	Ο.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		, Chile, Columbia,	Economic Education	30,000.	Wire	0.		

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Part II	Continuation o	f Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States.	. (Schedule F (Form 9	90), Part II, line 1	1)	r ugo z
1 (a) Name	e 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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			South America -						
			Argentina,						
			Bolivia, Brazil,						
			Chile, Columbia,	Economic Education	185,800.	Wire	Ο.		
			South America -						
			Argentina,						
			Bolivia, Brazil,						
			Chile, Columbia,	Economic Education	45,000.	Wire	Ο.		
			South America -						
			Argentina,						
			Bolivia, Brazil,						
			Chile, Columbia,	Economic Education	38,427.	Wire	0.		
			South America -						
			Argentina,						
			Bolivia, Brazil,						
			Chile, Columbia,	Economic Education	65,000.	Wire	Ο.		
			South America -						
			Argentina,						
			Bolivia, Brazil,						
			Chile, Columbia,	Economic Education	50,000.	Wire	Ο.		
			South America -						
			Argentina,						
			Bolivia, Brazil,						
			Chile, Columbia,	Economic Education	32,540.	Wire	0.		
			South America -						
			Argentina,						
			Bolivia, Brazil,						
			Chile, Columbia,	Economic Education	40,400.	Wire	Ο.		
			South America -						
			Argentina,						
			Bolivia, Brazil,						
			Chile, Columbia,	Economic Education	27,090.	Wire	0.		
			South America -						
			Argentina,						
			Bolivia, Brazil,						
			Chile, Columbia,	Economic Education	25,000.	Wire	0.		

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Part II Continuation of	of Grants and Other	Assistance to Organiz	ations or Entities Outside the	-				
1 (a) Name of organization	(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, FM appraisal, other)
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	40,757.	Wire	٥.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	19,000.	Wire	٥.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	8,000.	Wire	٥.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	10,000.	Wire	٥.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	13,070.	Wire	٥.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	29,180.	Wire	0.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	70,971.	Wire	٥.		
		South America -		,				
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	20,000.	Wire	0.		
		South America -		,				
		Argentina,						
		, Bolivia, Brazil,						
		, Chile, Columbia,	Economic Education	75,747.	Wire	0.		

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Part II Continuation o	f Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States.	Schedule F (Form S	90), Part II, line 1)	- i
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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	19,000.	Wire	٥.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	10,000.	Wire	٥.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	87,440.	Wire	٥.		
		South America -						
		Argentina,						
		Bolivia, Brazil,						
		Chile, Columbia,	Economic Education	11,300.	Wire	٥.		
		South Asia -						
		Afghanistan,						
		Bangladesh,						
		Bhutan, India,	Economic Education	52,158.	Wire	٥.		
		South Asia -						
		Afghanistan,						
		Bangladesh,						
		Bhutan, India,	Economic Education	124,000.	Wire	0.		
		South Asia -		, , , , , , , , , , , , , , , , , , ,				
		Afghanistan,						
		, Bangladesh,						
		Bhutan, India,	Economic Education	55,200.	Wire	٥.		
		South Asia -		,				
		Afghanistan,						
		Bangladesh,						
		Bhutan, India,	Economic Education	146,756.	Wire	0.		
		South Asia -						
		Afghanistan,						
		Bangladesh,						
		Bhutan, India,	Economic Education	56,864.	Wire	0.		

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Part II Continuation of	f Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States.	Schedule F (Form S	90), Part II, line 1)	i
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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM) appraisal, other)
		South Asia -						
		Afghanistan,						
		Bangladesh,						
		Bhutan, India,	Economic Education	12,000.	Wire	Ο.		
		South Asia -						
		Afghanistan,						
		Bangladesh,						
		Bhutan, India,	Economic Education	12,700.	Wire	Ο.		
		South Asia -						
		Afghanistan,						
		Bangladesh,						
		Bhutan, India,	Economic Education	15,000.	Wire	Ο.		
		South Asia -						
		Afghanistan,						
		Bangladesh,						
		Bhutan, India,	Economic Education	6,600.	Wire	Ο.		
		South Asia -						
		Afghanistan,						
		Bangladesh,						
		Bhutan, India,	Economic Education	30,960.	Wire	Ο.		
		South Asia -						
		Afghanistan,						
		Bangladesh,						
		Bhutan, India,	Economic Education	16,376.	Wire	0.		
		Sub-Saharan						
		Africa - Angola,						
		Benin, Botswana,						
		, Burkina Faso,	Economic Education	11,000.	Wire	0.		
		, Sub-Saharan		,				
		Africa - Angola,						
		Benin, Botswana,						
		Burkina Faso,	Economic Education	10,000.	Wire	ο.		
		Sub-Saharan						
		Africa - Angola,						
		Benin, Botswana,						
		Burkina Faso,	Economic Education	118,397.	Wire	ο.		

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Part II Continuation o	f Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States	. (Schedule F (Form §)	
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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		Sub-Saharan						
		Africa - Angola,						
		Benin, Botswana,						
		Burkina Faso,	Economic Education	30,000.	Wire	٥.		
		Sub-Saharan						
		Africa - Angola,						
		Benin, Botswana,						
		Burkina Faso,	Economic Education	5,100.	Wire	٥.		
		Sub-Saharan						
		Africa - Angola,						
		Benin, Botswana,						
		Burkina Faso,	Economic Education	18,500.	Wire	٥.		
		Sub-Saharan						
		Africa - Angola,						
		Benin, Botswana,						
		Burkina Faso,	Economic Education	70,267.	Wire	٥.		
		Sub-Saharan						
		Africa - Angola,						
		Benin, Botswana,						
		Burkina Faso,	Economic Education	15,370.	Wire	٥.		
		Sub-Saharan		-				
		Africa - Angola,						
		Benin, Botswana,						
		Burkina Faso,	Economic Education	15,600.	Wire	٥.		
		Sub-Saharan		-				
		Africa - Angola,						
		Benin, Botswana,						
		Burkina Faso,	Economic Education	15,000.	Wire	0.		
		Sub-Saharan						
		Africa - Angola,						
		Benin, Botswana,						
		, , Burkina Faso,	Economic Education	20,000.	Wire	٥.		
	1	, Sub-Saharan		,				
		Africa - Angola,						
		Benin, Botswana,						
		, Burkina Faso,	Economic Education	35,000.	Wire	0.		

Atlas Economic Research Foundation

94-2763845

Part II Continuation of	f Grants and Other	Assistance to Organiz	ations or Entities Outside the	United States	(Schedule F (Form 9	90), Part II, line	1)	1
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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		Sub-Saharan						
		Africa - Angola,						
		Benin, Botswana,						
		Burkina Faso,	Economic Education	5,500.	Wire	0.		
		Sub-Saharan						
		Africa - Angola,						
		Benin, Botswana,						
		Burkina Faso,	Economic Education	15,500.	Wire	0.		
		Sub-Saharan						
		Africa - Angola,						
		Benin, Botswana,						
		Burkina Faso,	Economic Education	14,936.	Wire	0.		
		Sub-Saharan						
		Africa - Angola,						
		Benin, Botswana,						
		Burkina Faso,	Economic Education	35,000.	Wire	٥.		
		Sub-Saharan						
		Africa - Angola,						
		Benin, Botswana,						
		Burkina Faso,	Economic Education	12,750.	Wire	0.		
		Sub-Saharan						
		Africa - Angola,						
		Benin, Botswana,						
		Burkina Faso,	Economic Education	15,000.	Wire	0.		

Page 3

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.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Economic education	South America	9	50,060.	Wire	0.		
	Europe (Including Iceland &						
Economic education	Greenland)	7	81,576.	Wire	0.		
	Sub-Saharan Africa - Angola, Benin, Botswana,						
Economic Education	Burkina Faso,	15	14,605.	Wire	0.		
	Central America						
Economic Education	and the Caribbean	3	1,425.	Wire	0.		
Economic Education	East Asia and the Pacific	2	2,965.	Wire	0.		
			2,500.				

Schedule F (Form 990) 2022

Schedule F (Form 990) 2022 Atlas Economic Research Foundation Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>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)</i>	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? <i>If</i> "Yes," <i>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)</i>	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) 2022

	-2763845	Page 5
Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting met investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and (estimated number of recipients), as applicable. Also complete this part to provide any additional information.	Part III, column (c	:)
Part I, Line 2:		
Atlas relies on the Grant Committee of its Board of Directors	to provi	de
oversight of the work of Atlas staff in establishing the elig	ibility a	nd
appropriateness of candidates for grants within Atlas program	s. Atlas	
supports (A) organizations that operate as non-profit researc	h	
institutes, (B) "intellectual entrepreneurs" embarking on the	creation	of
such organizations, and (C) scholars working in fields of int	ellectual	
inquiry relevant to Atlas programs. Grantees receiving funds	from Atla	S
must provide reports regarding the use of funds, except for t	hose	
instances in which Atlas's grants represent prizes to recogni	ze	
outstanding work (already completed or ongoing) in the fields	of endea	vor
central to the Atlas mission.		

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	Go	Grants and Oth vernments, an lete if the organizatio Go to www.irs	nd Individua	 S in the Uni on Form 990, Pa 990.	ted States rt IV, line 21 or 22.		OMB No. 1545-0047 2022 Open to Public Inspection
Name of the organization							Employer identification number
Atlas ECO Part I General Information on Grants a		earch Found	lation				94-2763845
 Does the organization maintain records a criteria used to award the grants or assis Describe in Part IV the organization's pro- 	to substantiate th stance?						
Part II Grants and Other Assistance to recipient that received more than the second se	-				anization answered "	res" on Form 990, Par	t IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Badger Institute 700 W. Virginia St. Suite 301 Milwaukee, WI 53203	39-1592727	501c3	50,000.	0.			Economic Education
Beacon Center of Tennessee P O Box 198646 Nashville, TN 37219	20-1808567	501c3	90,000.	0.			Economic Education
Becket Fund for Religious Liberty 1200 New Hampshire Ave NW Ste 700 Washington, DC 20036	52-1858532	501c3	20,000.	0.			Economic Education
Better Cities Project 4700 W. Rochelle Ave. #141 Las Vegas, NV 89103	83-4568874	501c3	91,017.	0.			Economic Education
Cardinal Institute for West Virginia – PO Box 11495 – Charleston, WV 25339	47-1932521	501c3	63,447.	0.			Economic Education
Commonwealth Foundation 225 State Street Suite 302 Harrisburg, PA 17101	23-2473845	501c3	140,000.	0.			Economic Education
 2 Enter total number of section 501(c)(3) a 3 Enter total number of other organization LHA For Paperwork Reduction Act Notice 	s listed in the line	1 table	ne line 1 table				28. 0. Schedule I (Form 990) 2022

Schedule I (Form 990) Atlas Economic Research Foundation

Part II Continuation of Grants and Other	Assistance to Do		s and Domestic G	overnments (Sche	edule I (Form 990), Pa	T ().)	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Consumer Choice Education							
712 H St NE PMB 94982							
Washington, DC 20002	87-2394482	501c3	804,812.	٥.			Economic Education
Economic Fundamentals Initiative							
110 Jabez Street #1060							
Newark, NJ 07105	83-3451365	501c3	10,000.	0.			Economic Education
End It For Good							
1000 Northpark Dr. Suite B							
Ridgeland, MS 39157	83-3778569	501c3	15,000.	0.			Economic Education
Foundation for Economic Education							
1819 Peachtree Road NE Ste 300							
Atlanta, GA 30309	13-6006960	501c3	30,000.	0.			Economic Education
Friends of UFM							
C/o Ross, Langan & McKendree, LLP							
7900 Westpark Drive Suite T420 -							
McLean, V	27-2852264	501c3	60,000.	0.			Economic Education
Frontier Institute							
615 Legend Loop A309							
Helena, MT 59602	85-0998465	501c3	55,500.	٥.			Economic Education
Goldwater Institute							
500 E Coronado Rd							
	96 0507661	501-2	E0.000				Raonomia Rducation
Phoenix, AZ 85004	86-0597661	501c3	50,000.	0.			Economic Education
Human Rights Foundation							
350 5th Ave Ste 4202							
	20-2669700	501c3	62 005	_			Economic Education
New York, NY 10118	20-2009/00	50103	63,225.	0.			ECONOMIC Education
Ideas Beyond Borders							
244 Fifth Avenue suite 2594							
New York, NY 10001	82-1447974	501c3	15,000.	0.			Economic Education

Schedule I (Form 990)

Schedule I (Form 990) Atlas Economic Research Foundation

|--|

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government		if applicable	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	
Institute for Justice							
901 N Glebe Rd Ste 900							
Arlington, VA 22203	52-1744337	501c3	10,000.	0.			Economic Education
International Society for			, -	-			
Individual Liberty - 539 W.							
Commerce St #6427 - Dallas, TX							
75208	54-1512492	501c3	22,600.	0.			Economic Education
			,				
John Locke Foundation							
4800 Six Forks Rd. Suite 220							
Raleigh, NC 27609	56-1656943	501c3	55,200.	0.			Economic Education
Ladies of Liberty Alliance							
911 M Street NW #A							
Washington, DC 20001	27-1047673	501c3	13,730.	0.			Economic Education
Mackinac Center for Public Policy							
140 West Main PO Box 568							
Midland, MI 48640-0568	46-4529156	501c3	30,000.	0.			Economic Education
Pacific Legal Foundation							
930 G Street							
Sacramento, CA 95814	94-2197343	501c3	55,455.	0.			Economic Education
Pelican Institute for Public	51 215,515		55,455.	0.			
Policy - 400 Poydras Street, Suite							
900 Maildrop P-5 - New Orleans, LA							
70130	26-1704791	501c3	23,323.	0.			Economic Education
, 01.50	20 1/04/91	50103	25,525.	0.			
Property and Environment Research							
Center - 2048 Analysis Drive Suite							
-	81-0393444	501c3	60,950.	0.			Economic Education
A - Bozeman, MT 59718	01-0353444	00162	00,950.	0.			
Puerto Rico Institute for Economic							
Liberty - #807 Fernandez Juncos							
-	66 0034507	501-2	15 200	0.			Raonomia Rducation
Ave – San Juan, PR 00917	66-0934587	P0163	15,320.	υ.			Economic Education

Schedule I (Form 990)

Atlas Economic Research Foundation Schedule I (Form 990)

|--|

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Students for Liberty 1750 Tysons Boulevard Suite 1500 McLean, VA 22102	27-4737588	501c3	64,049.	0.			Economic Education
Fexas Public Policy Foundation 901 Congress Ave Austin, TX 78701	74-2524057	501c3	60,000.	0.			Economic Education
University of Pittsburgh 4200 Fifth Avenue Pittsburgh, PA 15260	25-0965591	501c3	405,465.	0.			Economic Education
Young Voices 1342 Florida Ave NW Washington, DC 20009	81-2593815	501c3	60,000.	0.			Economic Education

Schedule I (Form 990)

94-2763845

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance						
Part IV Supplemental Information. Provide the information red	quired in Part I, lir	ne 2; Part III, column	(b); and any other a	dditional information.							
Part I, Line 2:											

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

Schedule I	(Form	990) opleme	ntal Info	At1 ormat	.as ion	Econc	mic	Res	earch	n Fou	Inda	tion		94	-27	638	45 Page 2
which	At1	as's	gran	ts r	repr	esent	pr	izes	to r	recog	nize	e out	sta	nding	y wo	rk	
(alrea	ady	comp.	leted	or	ong	oing)	in	the	fiel	.ds c	of e	ndeav	or	centr	al	to	the
Atlas	mis	sion	•														

SC	HEDULE J	Compensation Information	1	OMB No.	1545-00	47				
	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest	ŀ	2022						
ų		Compensated Employees		ZU	22	-				
	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.									
	tment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Open to Inspe						
Nan	ne of the organizatio		Employer i	identificati	on nu	mber				
		Atlas Economic Research Foundation	94-2	276384	5					
Pa	rt I Question	s Regarding Compensation								
					Yes	No				
1a	Check the appropr	iate box(es) if the organization provided any of the following to or for a person listed on Forn	n 990,							
	Part VII, Section A,	line 1a. Complete Part III to provide any relevant information regarding these items.								
	First-class or d	charter travel Housing allowance or residence for perso	onal use							
	Travel for com									
	Tax indemnific	ation and gross-up payments Health or social club dues or initiation fee	S							
	Discretionary	spending account Personal services (such as maid, chauffe	ur, chef)							
	,		, ,							
b	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or								
	•	provision of all of the expenses described above? If "No," complete Part III to explain		1b						
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,								
	•	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2	Х					
3	Indicate which, if a	ny, of the following the organization used to establish the compensation of the organization'	'S							
	CEO/Executive Dire	ector. Check all that apply. Do not check any boxes for methods used by a related organizat	tion to							
	establish compens	ation of the CEO/Executive Director, but explain in Part III.								
	X Compensation	n committee Written employment contract								
		compensation consultant I Compensation survey or study								
		ther organizations I Approval by the board or compensation of	committee							
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 re	lated organization:								
а	Receive a severand	e payment or change-of-control payment?		4a		X				
b	Participate in or rec	eive payment from a supplemental nonqualified retirement plan?		4b		X				
с	Participate in or rec	eive payment from an equity-based compensation arrangement?		4c		X				
	If "Yes" to any of lin	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.								
		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 compensati	on							
	contingent on the r	evenues of:								
а	The organization?			5a		X				
b	Any related organiz	ation?		5b		X				
		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 compensati	on							
	contingent on the r	net earnings of:								
а	The organization?			6a		X				
b	Any related organiz	ation?		6b		X				
		or 6b, describe in Part III.								
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment								
	not described on li	nes 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							
		ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X				
9	If "Yes" on line 8, d	id the organization also follow the rebuttable presumption procedure described in								
		ז 53.4958-6(c)?		9						
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Sched	dule J (Forr	n 990) 2022				

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-MISC and/or 1099-NEC (compensation			other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Bradley A. Lips	(i)	390,000.	0.	828.	9,150.	48,735.	448,713.	0.
CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) Chad Goote	(i)	308,256.	50,000.	360.	9,150.	8,013.	375,779.	0.
Chief Development Officer	(ii)	0.	0.	0.	0.	0.		0.
(3) Matt C. Warner	(i)	309,400.	0.	360.	9,150.	37,849.	356,759.	0.
President	(ii)	0.	0.	0.	0.	0.	-	0.
(4) Thomas G. Palmer	(i)	305,480.	0.	4,572.	8,873.	9,460.	328,385.	0.
Executive VP	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) Lyall J. Swim	(i)	225,000.	0.	540.	6,188.	37,085.	268,813.	0.
Chief Innovation Officer	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) Katherine Price	(i)	147,420.	0.	676.	4,423.	39,271.	191,790.	0.
Chief Operations Officer	(ii)	0.	0.	0.	0.	0.		0.
(7) Romulo Lopez	(i)	143,103.	0.	651.	4,293.	40,061.	188,108.	0.
Director of Finance	(ii)	0.	0.	0.	0.	0.	•••	0.
(8) Christopher J Kinnan	(i)	136,700.	0.	607.	4,101.	39,746.	181,154.	0.
Director of Information Sy	(ii)	0.	0.	0.	0.	0.		0.
(9) Patty Hohlbein	(i)	147,420.	0.	1,264.	4,423.	12,105.	165,212.	0.
VP of Atlas Network Academy	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Page 3

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2022

LHA	For Paperwork Reduction	Act Notice, see the	Instructions for F	orm 990 or 990-EZ.

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a,

28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. Attach to Form 990 or Form 990-EZ.

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

L **Open To Public** Inspection

OMB No. 1545-0047

Internal Revenue Service Name of the organization

SCHEDULE L

Department of the Treasury

(Form 990)

Part I

Atlag Economic Research Foundation

Employer identification number 91-2763815

Atlas Economic Research Foundation	94-270304	5
Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) orga	nizations only).	
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Pa	art V, line 40b.	-
		(

1 (a) Name of diagualitied pare	(b) Relationship between disqualified	(a) Description of transaction		(d) Cor	
(a) Name of disqualified perso	person and organization	(c) Description of transaction		Yes	No
2 Enter the amount of tax incur section 4958	rred by the organization managers or disqualif	ied persons during the year under	¢		
Section 4956			Φ		
3 Enter the amount of tax, if an	ly, on line 2, above, reimbursed by the organiz	ation	\$		

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan		an to or 1 the zation?	(e) Original principal amount	(f) Balance due	(g) defa	In ault?	(h) Ap by bo comm	proved ard or hittee?	(i) W agreei	ritten ment?
			То	From			Yes	No	Yes	No	Yes	No
	_											
otal					\$							

Part III

Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Schedule L (Form 990) 2022

	Economic Research F	oundation	94-2763	845	Page 2
Part IV Business Transactions Involv	-				
Complete if the organization answered				(e) Sha	aring of
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz	ation's
				Yes	No
Stephanie Lips	Wife of CEO	15,000.	Travel expe		X
Part V Supplemental Information.					
Provide additional information for response	onses to questions on Schedule L (see	instructions).			
Cab I Dart IV Buginaga	mongostions Intoluti	ng Intoroat	od Domaona.		
Sch L, Part IV, Business T		ng incerest	eu rersons:		
(a) Name of Person: Stepha	nie Lips				
(d) Description of Transac	tion: Travel expens	es with CEO	1		

SCHEDULE O (Form 990)

Name of the organization



94-2763845

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

organizations that promote individual freedom and are committed to

Atlas Economic Research Foundation

identifying and removing barriers to human flourishing.

Form 990, Part III, Line 2, New Program Services:

Atlas Network had a new Innovation Labs program in 2022 - constantly

innovating in different areas and looking for ways to reach out to our

partners and donors by developing regional centers, cohorts, events,

grants, and policy research.

Form 990, Part III, Line 4d, Other Program Services:

COACH - Atlas Network provides world-class seminars, workshops,

mentoring, and other learning opportunities that inspire

professionalism and build community among our independent partners.

Expenses \$ 1,787,563. including grants of \$ 97,595. Revenue \$ 7,120.

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

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

Schedule O (Form 990) 2022	Page 2
Name of the organization Atlas Economic Research Foundation	Employer identification number $94-2763845$
Form 990, Part VI, Section B, Line 15:	
Atlas has a Compensation Committee that is composed of in	dependent 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 on January 2023.

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

AK, AL, AR, CA, CT, FL, GA, IL, KY, ME, MI, MN, MS, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN

UT, VA, WV, WI, CO, DC, HI, KS, MA, MD, NV, NH, WA

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

Atlas posts its forms 990 and audited financial statements on its website.

It does not make its governing documents or conflict of interest policy

available to the public.