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Form **990**

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

OMB No 1545-0047

2003

Open to Public Inspection

Department of the Treasury
 Internal Revenue Service

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

A For the 2003 calendar year, or tax year beginning January 01, 2003, and ending December 31, 20 03

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

Please use IRS label or print or type See Specific Instructions

C Name of organization
FREEDOM FROM RELIGION INC MS ANNE GAYLOR
 Number and street (or P O box if mail is not delivered to street address) Room/suite
P O BOX 750 ROOM/SUITE 1
 City or town, state or country, and ZIP + 4
MADISON WI 53701

D Employer identification number
39 1302520
E Telephone number
 () -
F Accounting method Cash Accrual
 Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶ -----
H(c) Are all affiliates included? Yes No
 (If "No," attach a list See instructions)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Website: ▶ WWW.FFRF.ORG

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

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

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

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **681583**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions)

Revenue	1 Contributions, gifts, grants, and similar amounts received				
	a Direct public support	1a		281017	
	b Indirect public support	1b			
	c Government contributions (grants)	1c			
	d Total (add lines 1a through 1c) (cash \$ <u>281017</u> noncash \$ _____)	1d			281017
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			87186
	3 Membership dues and assessments	3			216690
	4 Interest on savings and temporary cash investments	4			96690
	5 Dividends and interest from securities	5			
	6a Gross rents	6a			
	b Less rental expenses	6b			
	c Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7 Other investment income (describe ▶ _____)	7				
	8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
	b Less cost or other basis and sales expenses	8a			
	c Gain or (loss) (attach schedule)	8b			
	d Net gain or (loss) (combine line 8c, columns (A) and (B))	8c			
8d	8d				
	9 Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>				
	a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a			
	b Less direct expenses other than fundraising expenses	9b			
9c	9c				
	10a Gross sales of inventory, less returns and allowances	10a			
	b Less cost of goods sold	10b			
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11 Other revenue (from Part VII, line 103)	11				
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12			681583	
Expenses	13 Program services (from line 44, column (B))	13			457394
	14 Management and general (from line 44, column (C))	14			72917
	15 Fundraising (from line 44, column (D))	15			2648
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses (add lines 16 and 44, column (A))	17			532959
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18			148624
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19			2882808
	20 Other changes in net assets or fund balances (attach explanation)	20			
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21			3031432

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ <u>14361</u> noncash \$ _____)	22 14361	14361		
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc	25 51000	40800	10200	
26	Other salaries and wages	26 149308	119446	29862	
27	Pension plan contributions	27 6800	5440	1360	
28	Other employee benefits	28			
29	Payroll taxes	29 13201	10561	2640	
30	Professional fundraising fees	30			
31	Accounting fees	31 6306		6306	
32	Legal fees	32 69960	69960		
33	Supplies	33 8498	6798	1700	
34	Telephone	34 2950	2360	590	
35	Postage and shipping	35 27635	22108	3869	1658
36	Occupancy	36 42460	33969	8491	
37	Equipment rental and maintenance	37 4038	4038		
38	Printing and publications	38 47201	44501	1710	990
39	Travel	39 7054	7054		
40	Conferences, conventions, and meetings	40 32813	32813		
41	Interest	41			
42	Depreciation, depletion, etc (attach schedule)	42			
43	Other expenses not covered above (itemize) a	43a			
b	Attachment #1: PART II OTHER EXPENSES	43b 49374	43185	6189	
c		43c			
d		43d			
e		43e			
44	Total functional expenses (add lines 22 through 43) <i>Organizations completing columns (B)-(D), carry these totals to lines 13-15</i>	44 532959	457394	72917	2648

Joint Costs. Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See page 25 of the instructions)

What is the organization's primary exempt purpose? TO KEEP CHURCH AND STATE SEPARATE	Program Service Expenses <small>(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)</small>
a LAWSUITS CHALLENGING ENTANGLEMENT OF CHURCH AND STATE AND GOVERNMENT ENDORSEMENT OF RELIGION	
(Grants and allocations \$ _____)	128385
b CONVENTION, MEETINGS, MEDIA APPEARANCES, SPEECHES, DEBATES TRAVEL, ADVERTISING AND AWARDS	
(Grants and allocations \$ _____)	105793
c PUBLISHING, PRINTING OF NEWSPAPERS, NEWSLETTERS, BOOKS, BROCHURES, PAMPHLETS	
(Grants and allocations \$ _____)	153115
d OPERATION OF FREETHOUGHT HALL IN MADISON, WI AND LAKE HYPATIA, AL, MAINTENANCE OF LIBRARY FOR MEMBERS' USE, AND CHAPTER REBATES	
(Grants and allocations \$ _____)	70101
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	457394

Part IV Balance Sheets (See page 25 of the instructions)

		(A) Beginning of year		(B) End of year	
Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only					
Assets	45	Cash—non-interest-bearing	231421	45	305146
	46	Savings and temporary cash investments	1433052	46	1515994
	47a	Accounts receivable			
	b	Less allowance for doubtful accounts			
	48a	Pledges receivable			
	b	Less allowance for doubtful accounts			
	49	Grants receivable		49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a	Other notes and loans receivable (attach schedule).	42903		
	b	Less allowance for doubtful accounts			
	52	Inventories for sale or use	12000	52	12000
	53	Prepaid expenses and deferred charges		53	
	54	Investments—securities (attach schedule).	862000	54	862000
	55a	Investments—land, buildings, and equipment basis			
b	Less accumulated depreciation (attach schedule).				
56	Investments—other (attach schedule)		56		
57a	Land, buildings, and equipment basis	522738			
b	Less accumulated depreciation (attach schedule).	229349			
58	Other assets (describe ► _____)		58		
59	Total assets (add lines 45 through 58) (must equal line 74)	2890244	59	3031432	
Liabilities	60	Accounts payable and accrued expenses	7436	60	0
	61	Grants payable		61	
	62	Deferred revenue		62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule).		63	
	64a	Tax-exempt bond liabilities (attach schedule)		64a	
	b	Mortgages and other notes payable (attach schedule)		64b	
	65	Other liabilities (describe ► _____)		65	
66	Total liabilities (add lines 60 through 65)	7436	66	0	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67	Unrestricted	2882808	67	3031432
	68	Temporarily restricted		68	
	69	Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70	Capital stock, trust principal, or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income, or other funds		72	
73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21).	2882808	73	3031432	
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	2890244	74	3031432	

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

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions)

a	Total revenue, gains, and other support per audited financial statements . . . ▶	a	681583
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments . . . \$		
(2)	Donated services and use of facilities \$		
(3)	Recoveries of prior year grants . . . \$		
(4)	Other (specify) _____ \$		
	Add amounts on lines (1) through (4) ▶	b	
c	Line a minus line b ▶	c	681583
d	Amounts included on line 12, Form 990 but not on line a :		
(1)	Investment expenses not included on line 6b, Form 990 . . . \$		
(2)	Other (specify) _____ \$		
	Add amounts on lines (1) and (2) ▶	d	
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	681583

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

a	Total expenses and losses per audited financial statements . . . ▶	a	532959
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities \$		
(2)	Prior year adjustments reported on line 20, Form 990 \$		
(3)	Losses reported on line 20, Form 990 . . . \$		
(4)	Other (specify) _____ \$		
	Add amounts on lines (1) through (4) ▶	b	
c	Line a minus line b ▶	c	532959
d	Amounts included on line 17, Form 990 but not on line a :		
(1)	Investment expenses not included on line 6b, Form 990. . . \$		
(2)	Other (specify) _____ \$		
	Add amounts on lines (1) and (2) ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	532959

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see page 27 of the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
ANNE NICOL GAYLOR 726 Miami Pass Madison WI 53711	PRESIDENT 40.00	51000	2202	
CATHERINE FAHRINGER 162 Lorenz Road San Antonia TX 78209	V-PRESIDENT 5.00	0		
PATRICIA CLEVELAND 111 Lake Joan Circle Munford AL 36268	V-PRESIDENT 5.00	0		
DAVID GROETHE 815 Beta Place Sioux Falls SD 57106	CHAIR 5.00	0		
JOSEPH CUNNINGHAM 320 Grant Drive Mascoutah IL 62258	V-PRESIDENT 5.00	0		
NORA CUSACK 1707 Rutledge St Madison WI 53704	SECRETARY 5.00	0		
KENNETH TAUBERT 310 North Segoe Rd Madison WI 53705	TREASURER 5.00	0		
NORMA CUNNINGHAM 320 Grant Drive Mascoutah IL 62258	V-PRESIDENT 5.00	0		
EDWARD SUSTERICH 6061 South 19th St Milwaukee WI 53221	V-PRESIDENT 5.00	0		

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No
If "Yes," attach schedule—see page 28 of the instructions

Part VI Other Information (See page 28 of the instructions)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	✓
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77	✓
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	✓
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	✓
b	If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a	Enter direct and indirect political expenditures See line 81 instructions	81a	
b	Did the organization file Form 1120-POL for this year?	81b	✓
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	✓
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	✓
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	✓
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	
85	<i>501(c)(4), (5), or (6) organizations</i> a Were substantially all dues nondeductible by members?	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85b	
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86	<i>501(c)(7) orgs</i> Enter a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	<i>501(c)(12) orgs</i> Enter a Gross income from members or shareholders	87a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	✓
89a	<i>501(c)(3) organizations</i> Enter Amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> , section 4912 <input type="checkbox"/> , section 4955 <input type="checkbox"/>		
b	<i>501(c)(3) and 501(c)(4) orgs</i> Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	✓
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="checkbox"/>		
d	Enter Amount of tax on line 89c, above, reimbursed by the organization <input type="checkbox"/>		
90a	List the states with which a copy of this return is filed <input type="checkbox"/>		
b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions)	90b	5
91	The books are in care of <input type="checkbox"/> ANNE NICOL GAYLOR Telephone no <input type="checkbox"/> (608) 256-8900 Located at <input type="checkbox"/> 304 W WASHINGTON AVE MADISON, WI ZIP + 4 <input type="checkbox"/> 53703		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> 92		

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
Note: Enter gross amounts unless otherwise indicated					
93 Program service revenue					
a NEWSPAPER					8978
b PUBLICATIONS					46081
c CONVENTION INCOME					29988
d REIMBURSEMENTS					2139
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					216690
95 Interest on savings and temporary cash investments			14	96690	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				96690	303876
105 Total (add line 104, columns (B), (D), and (E)).					400566

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93A	EDUCATION ON SEPARATION OF CHURCH AND STATE.
93B	EDUCATION ON SEPARATION OF CHURCH AND STATE.
93C	EDUCATION ON SEPARATION OF CHURCH AND STATE.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions)

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

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions)

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

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

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

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

Please Sign Here

Signature of officer: **ANNE NICOL GAYLOR, PRESIDENT** Date: **May 12, 2004**

Type or print name and title

Paid Preparer's Use Only

Preparer's signature: _____ Date: **05/12/2004** Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: **CLAUDIA VLISIDES CPA LLC** EIN: _____

2002 Atwood Avenue Suite 224 Madison, WI 53704-5382 Phone no: _____



SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No 1545-0047

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

2003

Department of the Treasury
Internal Revenue Service

Supplementary Information—(See separate instructions.)

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

Name of the organization
FREEDOM FROM RELIGION INC MS ANNE GAYLOR

Employer identification number
39 1302520

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

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
ANNE NICOL GAYLOR ----- 726 MIAMI PASS MADISON WI 53711	DIRECTOR 40	51000	2250	
DANIEL E BARKER ----- 2400 FOX AVENUE MADISON WI 53711	PUB RELNS DIR 40	50922	2100	
----- ----- -----				
----- ----- -----				
----- ----- -----				
Total number of other employees paid over \$50,000 ▶				

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

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE ----- -----		
----- ----- -----		
----- ----- -----		
----- ----- -----		
----- ----- -----		
Total number of others receiving over \$50,000 for professional services ▶		

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

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

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

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

- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

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

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

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting.*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in) . ▶	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	360532	328360	1160753	186321	2035966
16 Membership fees received	210549	178894	164298	169005	722746
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc. purpose	116546	105619	95726	103496	421387
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	71013	57790	48327	44665	221795
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge.					0
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					0
23 Total of lines 15 through 22.	758640	670663	1469104	503487	3401894
24 Line 23 minus line 17.	642094	565044	1373378	399991	2980507
25 Enter 1% of line 23	7586	6707	14691	5035	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24. ▶					26a 59610
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts ▶					26b 1652478
c Total support for section 509(a)(1) test Enter line 24, column (e) ▶					26c 2980507
d Add Amounts from column (e) for lines 18 <u>221795</u> 19 <u>0</u> ▶					
22 <u>0</u> 26b <u>1652478</u> ▶					26d 1874273
e Public support (line 26c minus line 26d total) ▶					26e 1106234
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶					26f 0.3712 %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return. Enter the sum of such amounts for each year					
(2002) (2001) (2000) (1999)					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year					
(2002) (2001) (2000) (1999)					
c Add Amounts from column (e) for lines 15 _____ 16 _____ ▶					27c _____
17 _____ 20 _____ 21 _____ ▶					27d _____
d Add Line 27a total _____ and line 27b total _____ ▶					27e _____
e Public support (line 27c total minus line 27d total), ▶					
f Total support for section 509(a)(2) test Enter amount from line 23, column (e), ▶					27f _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)), ▶					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)), ▶					27h %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15					

Part V Private School Questionnaire (See page 7 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement) ----- ----- -----		
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) ----- -----		
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities?		
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) ----- -----		
34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)

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

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

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

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

4-Year Averaging Period Under Section 501(h)

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

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e)).					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

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

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

Organization Name: FREEDOM FROM RELIGION INC MS ANNE GAYLOR

EIN: 39-1302520

Return: 990

IRS990 Part II Other Expenses

Statement: 1

Page 1 of 1

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT	(D) FUNDRAISING
INSURANCE	27720	22176	5544	
MISCELLANEOUS	440	352	88	
LIBRARY PROJECT	716	716		
PROMOTION	1195	1195		
AUTO EXPENSE	2783	2226	557	
DUES AND SUBSCRIPTIONS	904	904		
FILM PROJECT	15616	15616		

Organization Name: FREEDOM FROM RELIGION INC MS ANNE GAYLOR

EIN: 39-1302520

Return: 990

IRS990 Part II Line 22
Cash Grants and Allocations Paid

Statement: 2

Page 1 of 3

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
		3000		

Address:

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
		1200		

Address:

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
		1000		

Address:

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
		1000		

Address:

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
		1000		

Address:

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
		1000		

Address:

Organization Name: FREEDOM FROM RELIGION INC MS ANNE GAYLOR

EIN: 39-1302520

Return: 990

IRS990 Part II Line 22
Cash Grants and Allocations Paid

Statement: 2

Page 2 of 3

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
		1000		

Address:

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
		500		

Address:

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
		500		

Address:

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
		250		

Address:

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
		250		

Address:

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
		250		

Address:

Organization Name: FREEDOM FROM RELIGION INC MS ANNE GAYLOR

EIN: 39-1302520

Return: 990

IRS990 Part II Line 22
Cash Grants and Allocations Paid

Statement: 2

Page 3 of 3

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
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Address:

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
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Address:

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
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Address:

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
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Address:

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
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Address:

Recipient Name	Recipient Business Name	Amount	Relationship	Class of Activity
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Address:

Organization Name: FREEDOM FROM RELIGION INC MS ANNE GAYLOR

EIN: 39-1302520

Return: 990

IRS990 Investment Securities

Statement: 3

Page 1 of 1

DESCRIPTION

COST OR FMV

BOOK VALUE

US GOVERNMENT SECURITIES

862000

Organization Name: FREEDOM FROM RELIGION INC MS ANNE GAYLOR

EIN: 39-1302520

Return: 990

IRS990 Other Notes Receivable (Short Form)

Statement: 4

Page 1 of 1

CATEGORY NAME

AMOUNT

LOAN RECEIVABLE

42903

Attention: This page was created using data from an Electronically-Filed return.

Organization Name: FREEDOM FROM RELIGION INC MS ANNE GAYLOR **EIN:** 39-1302520
Return: 990 IRS990 Schedule A Part IV-A Statement: 5
Support Schedule – Other Income Schedule Page 1 of 1

Other Income Description	2002	2001	2000	1999	Total
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0

Attention: This page was created using data from an Electronically-Filed return.

Organization Name: FREEDOM FROM RELIGION INC MS ANNE GAYLOR

EIN: 39-1302520

Return: 990

Schedule A Scholarship Award

Statement: 6

Page 1 of 1

THE FOUNDATION CONDUCTS ANNUAL ESSAY COMPETITIONS FOR COLLEGE STUDENTS AND HIGH SCHOOL SENIORS. STUDENTS WRITE ON A THEME RELATED TO THE FOUNDATION'S TAX-EXEMPT PURPOSE. ANY HIGH SCHOOL OR COLLEGE STUDENT MAY ENTER. AWARDS ARE MADE TO STUDENTS FOR PURPOSES OF ASSISTING TUITION COSTS. THE CONTEST HAS BEEN CONDUCTED SINCE 1979 AS PART OF THE ORGANIZATION'S EDUCATION PROGRAM.

Attention: This page was created using data from an Electronically-Filed return.

Organization Name: FREEDOM FROM RELIGION INC MS ANNE GAYLOR

EIN: 39-1302520

Return: 990

Schedule A Self-Dealing Compensation

Statement: 7

Page 1 of 1

SEE 990/990EZ