

Form **990-EZ**

**Short Form**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-1150

**1999**

Department of the Treasury  
Internal Revenue Service

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) nonexempt charitable trust  
▶ For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.

**This Form is Open to Public Inspection**

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

**A** For the 1999 calendar year, OR tax year beginning 1 January 1999, 1999, and ending 31 December 1999

**B** Check if:

- Change of address
- Initial return
- Final return
- Amended return (required also for state reporting)

XJ 95-4615525 1999 \*\* 5-DIGIT 90028  
 29 9 31 3 IB 092  
 FOUNDATION FOR RELIGIOUS FREEDOM  
 CULT AWARENESS NETWORK  
 1680 VINE ST STE 415  
 LOS ANGELES CA 90028-8833

**D** Employer identification number

954615525

**E** Telephone number

323 468-0567

**F** Check  if exemption application is pending

**H** Enter four-digit group exemption number (GEN)

**G** Accounting method:  Cash  Accrual  Other (specify) ▶

**I** Type of organization—▶  Exempt under section 501(c)( 3 ) ◀ (insert number) OR  section 4947(a)(1) nonexempt charitable trust

**Note: Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990).**

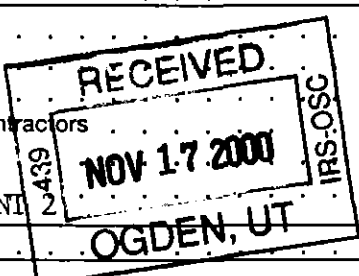
**J** Check  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, the organization should file a return without financial data. **Some states require a complete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

**K** Enter the organization's 1999 gross receipts (add back lines 5b, 6b, and 7b, to line 9) . . . ▶ \$ 40365

If \$100,000 or more, the organization must file Form 990 instead of Form 990-EZ.

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 32.)**

Revenue	1	Contributions, gifts, grants, and similar amounts received (attach schedule of contributors)	1	40273
	2	Program service revenue including government fees and contracts	2	0
	3	Membership dues and assessments	3	0
	4	Investment income	4	92
	5a	Gross amount from sale of assets other than inventory	5a	0
	5b	Less: cost or other basis and sales expenses	5b	0
	5c	Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule)	5c	0
	6	Special events and activities (attach schedule):		
	6a	Gross revenue (not including \$ <u>40273</u> of contributions reported on line 1)	6a	0
6b	Less: direct expenses other than fundraising expenses	6b	0	
6c	Net income or (loss) from special events and activities (line 6a less line 6b)	6c	0	
7a	Gross sales of inventory, less returns and allowances	7a	0	
7b	Less: cost of goods sold	7b	0	
7c	Gross profit or (loss) from sales of inventory (line 7a less line 7b)	7c	0	
8	Other revenue (describe ▶)	8		
9	<b>Total revenue</b> (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	40365	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	8355
	14	Occupancy, rent, utilities, and maintenance	14	7509
	15	Printing, publications, postage, and shipping	15	4041
	16	Other expenses (describe ▶)	16	14305
17	<b>Total expenses</b> (add lines 10 through 16)	17	34210	
Net Assets	18	Excess or (deficit) for the year (line 9 less line 17)	18	6155
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	49
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	<b>Net assets or fund balances at end of year</b> (combine lines 18 through 20)	21	6204



**Part II Balance Sheets—If Total assets on line 25, column (B) are \$250,000 or more, file Form 990 instead of Form 990-EZ.**

(See Specific Instructions on page 36.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	22	3469
23 Land and buildings	23	0
24 Other assets (describe ▶)	24	3032
25 <b>Total assets</b>	25	6501
26 <b>Total liabilities</b> (describe ▶)	26	(297)
27 <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	27	6204

SP4105P DEC 05 '00

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Sponsoring an information hotline: 5 volunteers from diverse religions helped over 3,000 callers to our 800 hotline; helping relatives, friends, and business associates amicably resolve significant differences in belief.

Collect and Maintain a Professional Referral List: The Foundation has expanded its list of qualified experts on religion and religious liberty to over 200 scholars, attorneys, mediators and many others. The Foundation makes these experts available to media, students, educators, and concerned family members.

Hosting Web Pages: The Foundation continues to maintain two websites ([www.cultawarenessnetwork.org](http://www.cultawarenessnetwork.org) and [www.forf.org](http://www.forf.org)). During 1999, the Foundation upgraded these sites to include objective information on many religious groups and links to many other religious tolerance sites, increasing the weekly hits on our sites from 2,000 to over 10,000.

MA

FORM 990

## OTHER EXPENSES DETAIL:

5110 Telephone	6,092
5120 Office & Admin	3,785
5170 Dissemination	384
5240 Travel	3,570
5286 Licenses	340
5290 Bank charges	694
5450 Depreciation expense	240
5462 State Franchise tax	(800)
	-----
Total Other Expenses	14,305

TB By Org/Tr/Acct

1) Board Member  
Addresses?

2)

↳

Form **2758**

(Rev. June 1998)

Department of the Treasury  
Internal Revenue Service

### Application for Extension of Time To File Certain Excise, Income, Information, and Other Returns

OMB No. 1545-0148

File a separate application for each return.

Please type or print. File the original and one copy by the due date for filing your return. See instructions.	Name <b>FOUNDATION FOR RELIGIOUS FREEDOM</b>	Employer identification number <b>95-4615525</b>
	Number, street, and room or suite no. (or P.O. box no. if mail is not delivered to street address) <b>1680 N. VINE AVE., #415</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>LOS ANGELES, CA 90028</b>	

Note: Corporate income tax return filers must use Form 7004 to request an extension of time to file. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

1 I request an extension of time until NOVEMBER 15, 2000, to file (check only one):

- |  |  |   |                                    |
|--|--|---|------------------------------------|
| <input type="checkbox"/> Form 708-GS(D)                | <input type="checkbox"/> Form 990-T (SEC 401(a) or 408(a) trust) | <input type="checkbox"/> Form 1120-ND (sec. 4951 taxes) | <input type="checkbox"/> Form 6612 |
| <input type="checkbox"/> Form 706-GS(T)                | <input type="checkbox"/> Form 990-T (trust other than above)     | <input type="checkbox"/> Form 3520-A                    | <input type="checkbox"/> Form 8813 |
| <input checked="" type="checkbox"/> Form 990 or 990-EZ | <input type="checkbox"/> Form 1041 (estate) (see instructions)   | <input type="checkbox"/> Form 4720                      | <input type="checkbox"/> Form 8725 |
| <input type="checkbox"/> Form 990-BL                   | <input type="checkbox"/> Form 1041-A                             | <input type="checkbox"/> Form 5227                      | <input type="checkbox"/> Form 8804 |
| <input type="checkbox"/> Form 990-PF                   | <input type="checkbox"/> Form 1042                               | <input type="checkbox"/> Form 6069                      | <input type="checkbox"/> Form 8831 |

If the organization does not have an office or place of business in the United States, check this box

2a For calendar year 99, or other tax year beginning \_\_\_\_\_ and ending \_\_\_\_\_

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

3 Has an extension of time to file been previously granted for this tax year?  Yes  No

4 State in detail why you need the extension

ADDITIONAL TIME IS NEEDED TO OBTAIN THE NECESSARY INFORMATION TO FILE A COMPLETE AND ACCURATE TAX RETURN.

5a If this form is for Form 708-GS(D), 706-GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, 8804, or 8831, enter the tentative tax, less any nonrefundable credits. See instructions. \$ \_\_\_\_\_

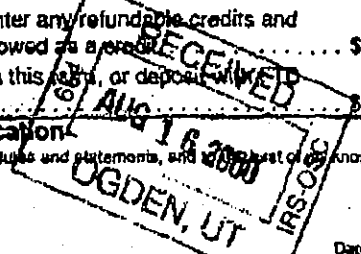
b If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$ \_\_\_\_\_

c Balance due. Subtract line 5b from line 5a. Include your payment with this return, or deposit with coupon if required. See instructions. \$ \_\_\_\_\_

#### Signature and Verification

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

Signature *Regina C. Koger* Title CPA Date 8/17/00



FILE ORIGINAL AND ONE COPY. The IRS will show below whether or not your application is approved and will return the copy.

#### Notice to Applicant - To Be Completed by the IRS

- We HAVE approved your application. Please attach this form to your return.
- We HAVE NOT approved your application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of your return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to your return.
- We HAVE NOT approved your application. After considering the reasons stated in item 4, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period.
- We cannot consider your application because it was filed after the due date of the return for which an extension was requested.
- Other: \_\_\_\_\_

EXTENSION APPROVED

Director \_\_\_\_\_ By: \_\_\_\_\_ Date AUG 24 2000

If you want a copy of this form to be returned to an address other than that shown above, please enter the address to which the copy should be sent.

Please Type or Print	Name <b>FOUNDATION FOR RELIGIOUS FREEDOM C/O NSBN &amp; CO LLP</b>
	Number, street, and room or suite no. (or P.O. box no. if mail is not delivered to street address) <b>9454 WILSHIRE BLVD., 4TH FLOOR</b>
	City, town, or post office, state, and ZIP code. For a foreign address, see instructions. <b>BEVERLY HILLS, CA 90212</b>

Form **2758**  
(Rev. June 1998)

### Application for Extension of Time To File Certain Excise, Income, Information, and Other Returns

OMB No. 1545-0148

Department of the Treasury  
Internal Revenue Service

► **File a separate application for each return.**

Please type or print. File the original and one copy by the due date for filing your return. See instructions on back.

Name	<b>Foundation for Religious Freedom</b>	Employer identification number	<b>95-4615525</b>
Number, street, and room or suite no. (or P.O. box no. if mail is not delivered to street address)	<b>1680 N. Vine Ave. #415</b>		
City, town or post office, state, and ZIP code. For a foreign address, see instructions.	<b>Los Angeles, CA 90028</b>		

Note: Corporate income tax return filers must use Form 7004 to request an extension of time to file Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1035, 1036, or 1041.

- 1 I request an extension of time until **Aug. 15, 2000** to file (check only one):
- |  |   |   |                                    |
|--|---|---|------------------------------------|
| <input type="checkbox"/> Form 706-GS(D)                | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 1120-ND (sec. 1451 taxes) | <input type="checkbox"/> Form 8612 |
| <input type="checkbox"/> Form 706-GS(T)                | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 3520-A                    | <input type="checkbox"/> Form 8613 |
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| <input type="checkbox"/> Form 990-BL                   | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 5227                      | <input type="checkbox"/> Form 8804 |
| <input type="checkbox"/> Form 990-PF                   | <input type="checkbox"/> Form 1042                                | <input type="checkbox"/> Form 6069                      | <input type="checkbox"/> Form 8831 |

If the organization does not have an office or place of business in the United States, check this box.

- 2a For calendar year **99**, or other tax year beginning \_\_\_\_\_ and ending \_\_\_\_\_
- b If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period
- 3 Has an extension of time to file been previously granted for this tax year?  Yes  No
- 4 State in detail why you need the extension **Additional time is needed for review of this return by accountants and legal counsel**

- 5a If this form is for Form 706-GS(D), 706-GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, 8804, or 8831, enter the tentative tax, less any nonrefundable credits. See instructions. \$ \_\_\_\_\_
- b If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$ \_\_\_\_\_
- c Balance due. Subtract line 5b from line 5a. Include your payment with this form, or deposit with FTD coupon if required. See instructions. \$ \_\_\_\_\_

#### Signature and Verification

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

Signature ► *[Signature]* Title ► **Certified Public Accountant** Date ► **15 May 00**

FILE ORIGINAL AND ONE COPY. The IRS will show below whether or not your application is approved and will return the copy.

#### Notice to Applicant—To Be Completed by the IRS

- We HAVE approved your application. Please attach this form to your return.
- We HAVE NOT approved your application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of your return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to your return.
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- We cannot consider your application because it was filed after the due date of the return for which an extension was requested.
- Other: \_\_\_\_\_

Director \_\_\_\_\_ By \_\_\_\_\_ Date \_\_\_\_\_

If you want a copy of this form to be returned to an address other than that shown above, please enter the address to which the copy should be sent.

Please Type or Print	Name	
	Number, street, and room or suite no. (or P.O. box no. if mail is not delivered to street address)	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	