

Return of Organization Exempt From Income Tax

2000

Open to Public Inspection

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation), section 527, or section 4947(a)(1) nonexempt charitable trust

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 2000 calendar year, or tax year period beginning **1 January**, 2000, and ending **31 December**, 2000

B Check if applicable: <input type="checkbox"/> Change of address <input type="checkbox"/> Change of name <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return	Please use IRS label or print or type. See Specific Instructions.	C Name of organization FOUNDATION FOR RELIGIOUS TOLERANCE	D Employer identification number 95 4035696
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1332 L. RON HUBBARD WAY	E Telephone number (323) 661-1196
		City or town, state or country, and ZIP code LOS ANGELES, CA 90027-5902	F Check <input type="checkbox"/> if application pending

G Organization type (check only one) 501(c) (3) (insert no.) 527 or 4947(a)(1)

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

J Accounting method: Cash Accrual Other (specify) ▶

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.

Note: H and I are not applicable to section 527 orgs.

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 inst.) N/A

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Enter 4-digit group exemption no. (GEN) ▶

L Check this box if the organization is not required to attach Schedule B (Form 990 or 990-EZ) ▶

SCANNED DEC 13 2001

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16.)

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Direct public support	1a	148,424.		
	b Indirect public support	1b	277,074.		
	c Government contributions (grants)	1c			
	d Total (add lines 1a through 1c) (cash \$ 425,498. noncash \$)	1d			425,498
	2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			
	3 Membership dues and assessments	3			
	4 Interest on savings and temporary cash investments	4			23.
	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	100.		
	c Gain or (loss) (attach schedule)	8b	1,180.		
	d Net gain or (loss) (combine line 8c, columns (A) and (B)) Statement 1	8c	(1,080.)		(1,080.)
	9 Special events and activities (attach schedule)				
	a Gross revenue (not including \$) of contributions reported on line 7a	9a			
	b Less: direct expenses other than fundraising expenses	9b			
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c				
	10a Gross sales of inventory, less returns and allowances	10a	12,853.		
	b Less: cost of goods sold Statement 2	10b	7,526.		
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			5,327.
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			429,768.	
Expenses	13 Program services (from line 44, column (B))	13			405,372.
	14 Management and general (from line 44, column (C))	14			2,574.
	15 Fundraising (from line 44, column (D))	15			14,839.
	16 Payments to affiliates (attach schedule)	16			
	17 Total expenses (add lines 16 and 44, column (A))	17			422,785.
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)	18			6,983.
	19 Net assets or fund balances at beginning of year (from line 73, column (A))	19			4,136.
	20 Other changes in net assets or fund balances (attach explanation)	20			0.
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21			11,119.

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Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 20.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ 2,344.)	2,344.	2,344	STATEMENT 5	
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	0.	0.	0.	0.
26	Other salaries and wages				
27	Pension plan contributions				
28	Other employee benefits				
29	Payroll taxes				
30	Professional fundraising fees				
31	Accounting fees				
32	Legal fees				
33	Supplies	3,767.	2,614.	406.	747.
34	Telephone	3,827.	2,679.	383.	765.
35	Postage and shipping	4,422.	3,096.	442.	884.
36	Occupancy	3,032.	2,123.	303.	606.
37	Equipment rental and maintenance	2,610.	1,827.	261.	522.
38	Printing and publications	1,517.	1,517.	0.	0.
39	Travel	1,433.	1,382.	51.	0.
40	Conferences, conventions, and meetings				
41	Interest Statement 4	40.	28.	4.	8.
42	Depreciation, depletion, etc. (attach schedule)	551.	386.	55.	110.
43	Other expenses (itemize): a Bank charges	4,175.	2,920.	419.	836.
	b Commissions	11,655.	1,294.	0.	10,361.
	c Dissemination	383,162.	383,162.	0.	0.
	d				
	e Permits & fees	250.		250.	
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	422,785.	405,372.	2,574.	14,839.

Reporting of Joint Costs. Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? 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 Specific Instructions on page 23.)

What is the organization's primary exempt purpose? ▶		Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)		(Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts; but optional for others.)
a	See Statement 5 (Grants and allocations \$ 2,344.)	405,372.
b	 (Grants and allocations \$)	
c	 (Grants and allocations \$)	
d	 (Grants and allocations \$)	
e	Other program services (attach schedule) (Grants and allocations \$)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶	405,372.

Part IV Balance Sheets (See Specific Instructions on page 23.)

		(A)		(B)
		Beginning of year		End of year
Assets	45 Cash—non-interest-bearing	1,219.	45	4,377.
	46 Savings and temporary cash investments	189.	46	3,094.
	47a Accounts receivable		47a	
	b Less: allowance for doubtful accounts		47b	47c
	48a Pledges receivable		48a	
	b Less: allowance for doubtful accounts		48b	48c
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a Other notes and loans receivable (attach schedule)		51a	
	b Less: allowance for doubtful accounts		51b	51c
	52 Inventories for sale or use	4,412.	52	753.
	53 Prepaid expenses and deferred charges		53	
	54 Investments—securities (attach schedule) ▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
	55a Investments—land, buildings, and equipment: basis		55a	
b Less: accumulated depreciation (attach schedule)		55b	55c	
56 Investments—other (attach schedule)		56		
57a Land, buildings, and equipment: basis	4,191.	57a		
b Less: accumulated depreciation (attach schedule) Statement 4	881.	57b	57c	
58 Other assets (describe ▶)		58		
59 Total assets (add lines 45 through 58) (must equal line 74)	7,988.	59	11,534.	
Liabilities	60 Accounts payable and accrued expenses		60	
	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 ▶ Statement 6)	3,852.	65	415.
66 Total liabilities (add lines 60 through 65)	3,852.	66	415.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted		67	
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds	0.	70	0.
	71 Paid-in or capital surplus, or land, building, and equipment fund	0.	71	0.
	72 Retained earnings, endowment, accumulated income, or other funds	4,136.	72	11,119.
73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72; column (A) must equal line 19 and column (B) must equal line 21)	4,136.	73		
74 Total liabilities and net assets / fund balances (add lines 66 and 73)	7,988.	74	11,534.	

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

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 25.)	Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
<p>a Total revenue, gains, and other support per audited financial statements ▶</p> <p>b Amounts included on line a but not on line 12, Form 990:</p> <p>(1) Net unrealized gains on investments \$ _____</p> <p>(2) Donated services and use of facilities \$ _____</p> <p>(3) Recoveries of prior year grants \$ _____</p> <p>(4) Other (specify): _____</p> <p style="text-align: right;">\$ _____</p> <p>Add amounts on lines (1) through (4) ▶</p> <p>c Line a minus line b ▶</p> <p>d Amounts included on line 12, Form 990 but not on line a:</p> <p>(1) Investment expenses not included on line 6b, Form 990 \$ _____</p> <p>(2) Other (specify): _____</p> <p style="text-align: right;">\$ _____</p> <p>Add amounts on lines (1) and (2) ▶</p> <p>e Total revenue per line 12, Form 990 (line c plus line d) ▶</p>	<p>a Total expenses and losses per audited financial statements ▶</p> <p>b Amounts included on line a but not on line 17, Form 990:</p> <p>(1) Donated services and use of facilities \$ _____</p> <p>(2) Prior year adjustments reported on line 20, Form 990 \$ _____</p> <p>(3) Losses reported on line 20, Form 990 \$ _____</p> <p>(4) Other (specify): _____</p> <p style="text-align: right;">\$ _____</p> <p>Add amounts on lines (1) through (4) ▶</p> <p>c Line a minus line b ▶</p> <p>d Amounts included on line 17, Form 990 but not on line a:</p> <p>(1) Investment expenses not included on line 6b, Form 990 \$ _____</p> <p>(2) Other (specify): _____</p> <p style="text-align: right;">\$ _____</p> <p>Add amounts on lines (1) and (2) ▶</p> <p>e Total expenses per line 17, Form 990 (line c plus line d) ▶</p>

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see Specific Instructions on page 25.)

(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
SHERMAN, ERIC 1332 L. RON HUBBARD WAY LOS ANGELES, CA 90027	TRUSTEE AS NEEDED	0.	0.	0.
HALL, TOM 1332 L. RON HUBBARD WAY LOS ANGELES, CA 90027	TRUSTEE AS NEEDED	0.	0.	0.
GOULD, MURRAY 1332 L. RON HUBBARD WAY LOS ANGELES, CA 90027	TRUSTEE AS NEEDED	0.	0.	0.
GOODMAN, LELSA 1332 L. RON HUBBARD WAY LOS ANGELES, CA 90027	TRUSTEE AS NEEDED	0.	0.	0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No
If "Yes," attach schedule—see Specific Instructions on page 26.

Part VI Other Information (See Specific Instructions on page 26.)		N/A	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			X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.			X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?			X
78b	If "Yes," has it filed a tax return on Form 990-T for this year?			NA
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement			X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?			X
80b	If "Yes," enter the name of the organization and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.			
81a	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81	81a		0.
81b	Did the organization file Form 1120-POL for this year?			X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?			X
82b	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 for reporting in Part III.)	82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?		X	
83b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?			X
84b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
85a	501(c)(4), (5), or (6) organizations. Were substantially all dues nondeductible by members?			
85b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			
85c	Dues, assessments, and similar amounts from members	85c		N/A
85d	Section 162(e) lobbying and political expenditures	85d		N/A
85e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e		N/A
85f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f		N/A
85g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?			
85h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?			
86a	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a		
86b	Gross receipts, included on line 12, for public use of club facilities	86b		
87a	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a		
87b	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			X
89a	501(c)(3) organizations. 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"/>			0.
89b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction			X
89c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			0.
89d	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.
90a	List the states with which a copy of this return is filed			0.
90b	Number of employees employed in the pay period that includes March 12, 2000 (See inst.)	90b		
91	The books are in care of LEISA GOODMAN Telephone no. (323) 661-1196 Located at 1332 L. RON HUBBARD WAY, LOS ANGELES CA ZIP code 90027			
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year			N/A

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 30.)

	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	
Enter gross amounts unless otherwise indicated.					
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	23.	
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					(1,080.)
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					5,327.
103 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		23.	4,247.
105 Total (add line 104, columns (B), (D), and (E))					4,247.

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 31.)

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).
100	LOSS ON SALE/DISPOSAL OF NON-INVENTORY ASSETS
102	ITEMS SOLD TO PROMOTE EXEMPT PURPOSE

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 31.)

(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
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 31.)

- (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).

Please Sign Here

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 (Important: See General Instruction W, on page 14.)

Signature of officer: *Leisa Goodman* Date: 13 Nov 2001 LEISA GOODMAN, TRUSTEE
Type or print name and title.

Paid Preparer's Use Only

Preparer's signature: _____ Date: _____ Check if self-employed Preparer's SSN or PTIN: _____
Firm's name (or yours if self-employed) and address, and ZIP code: _____ EIN: _____ Phone no: () _____



SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

** PUBLIC DISCLOSURE COPY **
Organization Exempt Under Section 501(c)(3)

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

Supplementary Information—(See separate instructions.)

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

OMB No. 1545-0047

2000

Name of the organization

FOUNDATION FOR RELIGIOUS TOLERANCE

Employer identification number

95-4035696

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
NONE				

Total number of other employees paid over \$50,000 ▶	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 1 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 ▶	0	

Part III Statements About Activities

- 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 ▶ \$ _____
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 of its 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:
 - a Sale, exchange, or leasing of property?
 - b Lending of money or other extension of credit?
 - c Furnishing of goods, services, or facilities?
 - d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?
 - e Transfer of any part of its income or assets?
If the answer to any question is "Yes," attach a detailed statement explaining the transactions.
- 3 Does the organization make grants for scholarships, fellowships, student loans, etc.?
- 4a Do you have a section 403(b) annuity plan for your employees?
- b Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See page 2 of the instructions.)

	Yes	No
1		X
2a		X
2b		X
2c		X
2d		X
2e		X
3		X
4a		X

Part IV Reason for Non-Private Foundation Status (See pages 2 through 5 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, page 5.)
- 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 5 of the instructions.)

Part V Private School Questionnaire (See page 5 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

		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 7 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

Check here **a** if the organization belongs to an affiliated group.
 Check here **b** if you checked "a" above 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)	N/A	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)		
38	Total lobbying expenditures (add lines 36 and 37)		
39	Other exempt purpose expenditures		
40	Total exempt purpose expenditures (add lines 38 and 39)		
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 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)		
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36		
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38		

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 9 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 9 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	X		
b Paid staff or management (Include compensation in expenses reported on lines c through h.)	X		
c Media advertisements	X		
d Mailings to members, legislators, or the public	X		
e Publications, or published or broadcast statements	X		
f Grants to other organizations for lobbying purposes	X		
g Direct contact with legislators, their staffs, government officials, or a legislative body	X		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means	X		
i Total lobbying expenditures (add lines c through h)			0.

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

FOUNDATION FOR RELIGIOUS TOLERANCE

95-4035696

FORM 990 2000 GAIN (LOSS) FROM SALE OF OTHER ASSETS STATEMENT 1

DESCRIPTION		DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED	
LAPTOP		07/13/98	12/31/00	PURCHASED	
<u>NAME OF BUYER</u>	<u>GROSS SALES PRICE</u>	<u>COST OR OTHER BASIS</u>	<u>EXPENSE OF SALE</u>	<u>DEPREC</u>	<u>NET GAIN OR (LOSS)</u>
NONE-DISPOSAL	0.	1,686.	0.	506.	(1,080.)
FM 990, PART I, LN 8	0.	1,686.	0.	506.	(1,080.)

FORM 990 2000 INCOME AND COST OF GOODS SOLD STATEMENT 2
INCLUDED ON PART I, LINE 10

INCOME

1. GROSS RECEIPTS	12,853.	
2. RETURNS AND ALLOWANCES		
3. LINE 1 LESS LINE 2		12,853.
4. COST OF GOODS SOLD (LINE 13)	7,526.	
5. GROSS PROFIT (LINE 3 LESS LINE 4)		5,327.

COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR	4,412.	
7. MERCHANDISE PURCHASED	3,867.	
8. COST OF LABOR		
9. MATERIALS AND SUPPLIES		
10. OTHER COSTS		
11. ADD LINES 6 THROUGH 10		8,279.
12. INVENTORY AT END OF YEAR	753.	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12)		7,526.

FOUNDATION FOR RELIGIOUS TOLERANCE

95-4035696

FORM 990 2000 NONCASH CONTRIBUTIONS, GIFTS, GRANTS AND SIMILAR AMOUNTS PAID STATEMENT 3

ACTIVITY CLASSIFICATION: GENERAL SUPPORT

NAME OF DONEE	ADDRESS OF DONEE	RELATIONSHIP	AMOUNT
VARIOUS ORGANIZATIONS		NONE	2,344.

DATE OF GIFT	BOOK VALUE OF GIFT	PROPERTY DESCRIPTION	METHOD USED TO DETERMINE BOOK VALUE
VARIOUS	2,344.	MATERIALS	BOOK VALUE

TOTAL FOR THIS ACTIVITY 2,344.

TOTAL INCLUDED ON FORM 990, PART II, LINE 22 2,344.

FORM 990 2000 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 4

DESCRIPTION	COST OR OTHER BASIS	2000 DEPREC'N	ACCUM DEPREC'N	BOOK VALUE
COMPUTER/SURGE PROTECTOR	1,318.	264.	593.	725.
DESK & 2 CHAIRS	476.	48.	48.	428.
PHONE EQUIPMENT	455.	45.	46.	409.
TABLE	141.	14.	14.	127.
COMPAQ COMPUTER	1,800.	180.	180.	1,620.
TOTAL TO FORM 990, PART IV, LN 57	4,191.	551.	881.	3,310.

=====

FORM 990 2000 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 5

DESCRIPTION OF PROGRAM SERVICE ONE

DURING 2000, THE FOUNDATION CONTINUED TO BE ACTIVE IN PUBLIC AWARENESS CAMPAIGNS TO PROCLAIM THE MESSAGE OF RELIGIOUS TOLERANCE FOR ALL FAITHS. THIS MESSAGE AGAIN FOCUSED ON WESTERN EUROPE, ESPECIALLY FRANCE, WHERE RELIGIOUS MINORITIES ARE STILL EXPERIENCING DISCRIMINATION OR PERSECUTION BECAUSE OF THEIR BELIEFS.

IN FEBRUARY AND MARCH, THE FOUNDATION ASSISTED THE HUMAN RIGHTS DEPARTMENT OF THE CHURCH OF SCIENTOLOGY IN ORGANIZING A TRIBUNAL IN PARIS, FRANCE, WHICH PROVIDED A FORUM FOR TESTIMONY FROM MANY FRENCH CITIZENS WHO HAD SUFFERED DISCRIMINATION AND PERSECUTION FOR THEIR RELIGIOUS BELIEFS. THIS EVENT WAS WIDELY PUBLICIZED IN FRENCH NATIONAL MEDIA. AFTERWARDS, A COALITION OF VARIOUS RELIGIONS WAS FORMED TO WORK TOGETHER FOR RELIGIOUS FREEDOM.

FOUNDATION VOLUNTEERS WERE INVOLVED IN THE PREPARATION AND FUNDRAISING FOR THE NEW YORK CITY TO WASHINGTON, D.C. "MARATHON FOR HUMAN RIGHTS," IN WHICH 11 RUNNERS FROM FRANCE, GERMANY, ITALY, SOUTH AFRICA, ISRAEL, USA, ARGENTINA AND CANADA, ALONG WITH A SUPPORT TEAM, MET WITH UNITED NATIONS AND RELIGIOUS LEADERS TO DESCRIBE THE RELIGIOUS ABUSES OCCURRING IN WESTERN EUROPE. THE TORCH OF FREEDOM WAS LIT AT THE STATUE OF LIBERTY, AN APPROPRIATE LOCATION, AS THE STATUE WAS A GIFT FROM THE UNITED STATES' FRIEND AND ALLY, FRANCE. THE TORCH WAS PASSED FROM RELIGIOUS LEADER TO RELIGIOUS LEADER OF DIFFERENT FAITHS. ACCOMPANYING THE MARATHON WAS MR. IRVING SARNOFF, THE PRESIDENT OF THE NON-GOVERNMENTAL ORGANIZATION, "FRIENDS OF THE UNITED NATIONS."

THE MARATHON PROCEEDED TO PHILADELPHIA, PENNSYLVANIA. AN EVENT WAS DONE AT THE LIBERTY BELL IN INDEPENDENCE HALL, A LOCATION IMPORTANT TO RELIGIOUS FREEDOM. A PERSON THERE DRESSED AS BEN FRANKLIN PARTICIPATED, INVITING PEOPLE TO SIGN A PROCLAMATION OF LIBERTY.

THEN MARATHONERS CONTINUED TO D.C., WHERE THE POLICE WELCOMED THEM AND GAVE THEM HONORARY POLICE BADGES.

STATEMENT 5

FORM 990 2000

IN D.C., THEIR FINAL DESTINATION, THE RUNNERS TOOK PART IN A MULTI-FAITH RELIGIOUS RALLY THAT BROUGHT TOGETHER MEMBERS OF MANY FAITHS WHO SIGNED A JOINT DECLARATION TO OPPOSE RELIGIOUS INTOLERANCE IN EUROPE. WHILE IN WASHINGTON D.C., THEY AND OTHER FOUNDATION MEMBERS ATTENDED A CONGRESSIONAL HEARING THAT ADDRESSED THE ISSUE OF RELIGIOUS DISCRIMINATION IN WESTERN EUROPE. THAT DAY AND THE DAY FOLLOWING, THEY HELD DOZENS OF VISITS TO CONGRESSMEN AND SENATORS TO ALERT THEM TO RELIGIOUS INTOLERANCE IN EUROPE, IN PARTICULAR IN FRANCE.

JULY - DECEMBER 2000

THE FOUNDATION ALSO HELPED TO ORGANIZE AND CARRY OUT ANOTHER MARATHON LASTING SEVERAL WEEKS FROM BELGIUM THROUGH FRANCE (2,000 KILOMETERS). IT BEGAN IN SEPTEMBER, WITH 16 RUNNERS FROM FRANCE, GERMANY, ITALY, SOUTH AFRICA, ISRAEL, USA AND ARGENTINA, ACCOMPANIED BY A SUPPORT TEAM THAT BROUGHT ITS NUMBERS TO 26. THE MARATHON CARRIED A COPY OF THE UNITED NATIONS UNIVERSAL DECLARATION OF HUMAN RIGHTS AND A PETITION FOR FRENCH CITIZENS TO SIGN, URGING THE FRENCH GOVERNMENT TO COMPLY WITH THE DECLARATION.

THE MARATHON CULMINATED IN A MULTI-FAITH RALLY IN PARIS ON OCTOBER 23, ATTENDED BY 8,000 PEOPLE, INCLUDING SLIMS, BUDDHISTS, HINDUS, SCIENTOLOGISTS AND MEMBERS OF DOZENS OF OTHER GROUPS. TWENTY-FIVE RELIGIOUS LEADERS TOOK PART IN A PRESS CONFERENCE THE SAME DAY TO DENOUNCE A REPRESSIVE LEGISLATIVE PROPOSAL DESIGNED TO DISRUPT AND DISBAND MINORITY RELIGIOUS COMMUNITIES IN FRANCE. ALL THOSE ATTENDING SIGNED "A DECLARATION OF PERSONAL AND SPIRITUAL FREEDOM", CALLING ON THE FRENCH GOVERNMENT TO ABANDON ITS POLICIES OF RELIGIOUS INTOLERANCE AND DISCRIMINATION. WELL-KNOWN ARTISTS KIRSTIE ALLEY AND ISAAC HAYES AND LORD DUNCAN MCNAIR FROM BRITAIN ATTENDED THE PRESS CONFERENCE, HELD IN A RESTAURANT OVERLOOKING THE BASTILLE SQUARE. THE CONFERENCE WAS PUBLICIZED IN FRANCE, THROUGHOUT EUROPE AND THE UNITED STATES AND HELPED TO EXPOSE THE DANGERS OF THE PROPOSED LEGISLATION, WHICH HAS BEEN CONDEMNED BY THE LEADERS OF THE PREDOMINANT RELIGIONS OF FRANCE AND BY INTERNATIONAL HUMAN RIGHTS ORGANIZATIONS.

FOLLOWING THE PRESS CONFERENCE AND RALLY, A FREE CONCERT FOR HUMAN RIGHTS WAS HELD IN A BEAUTIFUL WOODED AREA ON THE OUTSKIRTS OF PARIS. OVER 8,000 PEOPLE ATTENDED, WITH SPEAKERS INCLUDING PROFESSORS OF RELIGION, ARTISTS, AND RELIGIOUS LEADERS.

FORM 990 2000

THE FOUNDATION ALSO HELPED TO ORGANIZE A "SPECIAL COMMISSION OF INQUIRY HEARING" THE FOLLOWING DAY, AT WHICH REPRESENTATIVES OF MINORITY RELIGIONS TARGETED FOR DISCRIMINATION BY FRENCH OFFICIALS GAVE POWERFUL TESTIMONY ABOUT THEIR EXPERIENCES. MORE THAN 30 DIFFERENT RELIGIOUS AND

PHILOSOPHICAL GROUPS WERE REPRESENTED IN THE 300-STRONG AUDIENCE. FRENCH OFFICIALS CONSIDERED RESPONSIBLE FOR THE ABUSES HAD BEEN INVITED, BUT DID NOT ATTEND. GERMAN, FRENCH, BELGIAN, BRITISH, AMERICAN, CANADIAN, AND SWEDISH ACADEMICS TOOK PART.

THE FOUNDATION ALSO PUBLICIZED THE MARATHON AND THE CONCLUDING RALLIES ON ITS WEBSITE.

THE FOUNDATION WRAPPED UP ITS ACTIVITIES IN 2000 BY TAKING PART IN AN EVENT FOR PEACE ORGANIZED BY THE UNITY AND DIVERSITY COUNCIL OF LOS ANGELES THAT WAS HELD ON DECEMBER 15 AT THE CHURCH OF RELIGIOUS SCIENCE. REPRESENTATIVES OF APPROXIMATELY 15 FAITHS, INCLUDING JEWISH, MOSLEM, CHRISTIAN, BUDDHIST, SCIENTOLOGIST AND OTHERS, PARTICIPATED IN THE EVENT, WHICH INCLUDED A CANDLE-LIT VIGIL FOR PEACE. THERE WERE SEVERAL HUNDRED ATTENDEES, AMONG THEM A REPRESENTATIVE OF THE DALAI LAMA. MEMBERS OF THE FOUNDATION DISTRIBUTED BOOKLETS CONTAINING A MESSAGE OF PEACE AND TOLERANCE.

IN SUMMARY, THROUGHOUT THE YEAR, THE FOUNDATION REACHED SEVERAL MILLION PEOPLE INCLUDING HUNDREDS OF RELIGIOUS, POLITICAL AND COMMUNITY LEADERS WITH ITS MESSAGE OF TOLERANCE AND HUMAN RIGHTS. THIS CONTRIBUTED TO HEIGHTENED PUBLIC AWARENESS OF THE DANGERS OF RELIGIOUS INTOLERANCE AND THE ESTABLISHMENT OF A COALITION OF SPIRITUAL AND RELIGIOUS ORGANIZATIONS IN FRANCE TO WORK TOWARDS GREATER TOLERANCE AND FREEDOM.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE A.	2,344.	405,372.
	=====	=====

FOUNDATION FOR RELIGIOUS TOLERANCE

95-4035696

FORM 990 2000

OTHER LIABILITIES

STATEMENT 6

<u>DESCRIPTION</u>	<u>BEGINNING OF YEAR</u>	<u>END OF YEAR</u>
INVENTORY PRODUCTION COST PAYABLE	2,452.	0.
LOAN PAYABLE - OPTIMA	1,090.	0.
SALES TAX PAYABLE	0.	415.
TOTAL TO 990, PART IV, LINE 65	3,852.	415.

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

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

Automatic 3-Month Extension of Time—Only submit original (no copies needed)
Note: Form 990-T corporations requesting an automatic 6-month extension—check this box and complete Part I only
 All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization Foundation for Religious Tolerance	Employer identification number 95 ; 4035696
	Number, street, and room or suite no. If a P.O. box, see instructions. 1332 L. Ron Hubbard Way	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Los Angeles CA 90027	

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

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

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

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until August 15, 2001 to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year 2000 or
 ▶ tax year beginning _____, 20____, and ending _____, 20____

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

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

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

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

Signature and Verification

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

Signature ▶ Doug [Signature] Title ▶ Chief Financial Officer Date ▶ 8 May 2001

- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only Part II and check this box **X**
- Note: Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.**
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II Additional (not automatic) 3-Month Extension of Time - Must file Original and One Copy.		
Type or print. File by the extended due date for filing the return. See instructions	Name of Exempt Organization FOUNDATION FOR RELIGIOUS TOLERANCE	Employer identification number 95-4035696
	Number, street, and room or suite no. If a P.O. box, see instructions. 1332 L. RON HUBBARD WAY	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LOS ANGELES, CA 90027-5902	

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

- Form 990
 Form 990-EZ
 Form 990-T (sec. 401(a) or 408(a) trust)
 Form 1041-A
 Form 5227
 Form 8870
 Form 990-BL
 Form 990-PF
 Form 990-T (trust other than above)
 Form 4720
 Form 6069

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

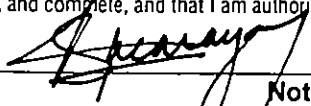
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the **whole group**, check this box . If it is for **part of the group**,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

- 4 I request an additional 3-month extension of time until NOVEMBER 15, 2001.
- 5 For calendar year 2000, or other tax year beginning _____ and ending _____.
- 6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- 7 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.

- 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____
- b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ _____
- c **Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ N/A

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  Title CPA Date 8-10-01

Notice to Applicant - To Be Completed by the IRS

- We have approved this application. Please attach this form to the organization's return.
- We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's 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 the organization's return.
- We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period.
- We cannot consider this application because it was filed after the due date of the return for which an extension was requested.
- Other _____

Director _____ By: _____ Date _____

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name NANAS STERN BIERS NEINSTEIN AND CO. LLP
	Number and street (include suite, room, or apt. no.) Or a P.O. box number 9454 WILSHIRE BLVD., 4TH FLOOR
	City or town, province or state, and country (including postal or ZIP code) BEVERLY HILLS, CA 90212-2907

FOUNDATION FOR RELIGIOUS TOLERANCE

95-4035696

FORM 990 2000

IDENTIFICATION OF EXCESS CONTRIBUTIONS
INCLUDED ON SCHEUDLE A, PART IV, LINE 26B

STATEMENT 7

*** NOT OPEN TO PUBLIC INSPECTION ***

CONTRIBUTOR'S NAME	TOTAL CONTRIBUTION	EXCESS CONTRIBUTION
	10,550.	5,715.
	6,650.	1,815.
	5,075.	240.
	5,000.	165.
TOTAL EXCESS CONTRIBUTIONS TO SCHEDULE A, LINE 26B		7,935.

STATEMENT 7