DLN: 93493320028392

Department of the Treasury

### **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

Open to Public

B Check Add	dress ch me char cal retur	C Name of organization AMERICAN ATHEISTS INC  Doing Business As	and ending 12	-31-2011		-		itification number
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Ter Am App	ial retur	nge -			_	F Teleph	66507 <b>one nu</b> i	
Ter Am App	mınated					(908)	276-7	300
Am App		Number and street (of PO box it mail is not delivered	to street address)	Room/suit	e			2,914,160
App Ta W		225 CRISTIANI STREET			ŀ			
r Ta J W K Forr	ended r	return City or town, state or country, and ZIP + 4 CRANFORD, NJ 07016						
J W K Forr	olication	pending			_			
J W K Forr		<b>F</b> Name and address of principal officer			<b>H(a)</b> Is this	s a group	return	for
J W K Forr		DAVID SILVERMAN 225 CRISTIANI STREET			affilia			┌ Yes
J W K Forr		CRANFORD,NJ 07016			H(b) Are all	affiliates	include	d?
J W					` '			(see instructions)
<b>K</b> Forr	x-exem	pt status $\checkmark$ 501(c)(3) $\checkmark$ 501(c)( ) $\checkmark$ (insert no ) $\checkmark$ 4	947(a)(1) or $\Gamma$ 5	27		, p exempt		
	ebsite	:▶ WWW ATHEISTS ORG						
	n of ord	Janization		<u> </u>	<b>L</b> Year of for	mation 19	87 <b>M</b>	State of legal domicile NJ
	rt I	Summary					•   • •	otato er rogar de inicio
		Briefly describe the organization's mission or most sign	ificant activities	<u> </u>				
		PROMOTION AND EDUCATION WITH RESPECT TO			HEISM AND	SEPARA	TION	OF CHURCH AND
e.	9	STATE						
≨	-							
Ě	-							
Governance	, -	Check this box 🛏 if the organization discontinued its	onerations or dis	enosed of	more than 2	5% of its	net ac	cotc
	1	,				J 70 OT 165	1	
Activities &		Number of voting members of the governing body (Part	•				3	15
ë E		Number of independent voting members of the governing					4	14
5		otal number of individuals employed in calendar year 2		ie Za) .			5	5
ă.		otal number of volunteers (estimate if necessary) .		6	35			
		otal unrelated business revenue from Part VIII, colum					7a	0
	Б	Net unrelated business taxable income from Form 990-	1, line 34 .	•	T 8.1		7b	0
	_		Prior	r Year		Current Year		
<u>o</u>	8	Contributions and grants (Part VIII, line 1h)	424,3			1,431,531		
Revenue	9	Program service revenue (Part VIII, line 2g)				56,		146,802
產	10	Investment income (Part VIII, column (A), lines 3, 4	•		36,047			107,920
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c				60,8	392	71,289
	12	Total revenue—add lines 8 through 11 (must equal Pa				577,8	395	1,757,542
	13	Grants and similar amounts paid (Part IX, column (A)					0	0
	14	Benefits paid to or for members (Part IX, column (A),	line 4)				0	0
	15	Salaries, other compensation, employee benefits (Pai						
Expenses		5-10)				177,	588	240,057
₹	16a	Professional fundraising fees (Part IX, column (A), lin	e 11e)				0	0
ਲੋ	Ь	Total fundraising expenses (Part IX, column (D), line 25) •89,73	0					
_	17	Other expenses (Part IX, column (A), lines 11a-11d	,11f-24e) .			403,5	557	637,129
	18	Total expenses Add lines 13-17 (must equal Part I)	(, column (A ), lii	ne 25)		581,	L45	877,186
	19	Revenue less expenses Subtract line 18 from line 12				-3,2	250	880,356
Net Assets or Fund Balances					Beginning		nt	End of Year
9 <del>4</del> 4	20	Total accets (Part V. Line 16)			<b>Y</b>	ear 1 972 /	170	2 070 225
, E	20	Total liabilities (Part X, line 16)		•		1,873,4		2,870,335
<u> </u>	21	Total liabilities (Part X, line 26)			-	1 925 (		250,733
	22	Net assets or fund balances Subtract line 21 from lir  Signature Block	16 20	• •	L	1,835,9	703	2,619,602
	rt II	Signature BIOCK ties of perjury, I declare that I have examined this return, i	noludina		andular == - ·		20 d i.	the best of
	ledge.	****** Signature of officer	oreparer (other th	an officer		12-11-05	tion of	which preparer has any
Here	е	DAVE SILVERMAN PRESIDENT						
		Type or print name and title						
Paid		Preparer's signature ANDREW SILVERSTEIN CPA	Date	se	heck if elf- mployed 🕨 🦵	Preparer's (see insti	uctions)	er identification number
	arer's	Firm's name (or yours DORFMAN ABRAMS MUSIC LLC		<u> </u>		EIN № 22	-165590	3
ا مول	Only	If self-employed), address, and ZIP + 4 250 PEHLE AVE SUITE 702				ETIN & 52	105580	J

SADDLE BROOK, NJ 07663 May the IRS discuss this return with the preparer shown above? (see instructions)  $\ \ .$  Phone no 🕨 (201) 403-9750

Form	1990 (2011)			Page <b>Z</b>
Par		Service Accomplishments a response to any question in this Part	III	r
<b>1</b> PRO	Briefly describe the organization's r			
2	Did the organization undertake any the prior Form 990 or 990-EZ? .	ignificant program services during the y	ear which were not listed on	「Yes 「No
	If "Yes," describe these new service	s on Schedule O		
3	Did the organization cease conduction services?	ng, or make significant changes in how i	conducts, any program	┌ Yes ┌ No
	If "Yes," describe these changes on	Schedule O		
4	expenses Section 501(c)(3) and 50	service accomplishments for each of its 1(c)(4) organizations and section 4947 total expenses, and revenue, if any, for	(a)(1) trusts are required to rep	
4a		\$ 696,270 including grants of \$ ESPECT TO ISSUES REGARDING ATHEISM AND TO O OTHER MEDIA FORUMS THE ORGANIZATION H		
4b	(Code ) (Expenses	\$ including grants of \$	) (Revenue \$	)
4c	(Code ) (Expenses	\$ including grants of \$	) (Revenue \$	)
	Other program services (Describe	ın Schedule O )		
	(Expenses \$	including grants of \$	) (Revenue \$	)
4e	Total program service expenses►\$	696,270		
		-		

Part IV	Checklist of	Required	Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💋	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I$	3		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure $98-19$ ? If "Yes," complete Schedule C, Part $III$	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $V^{\bullet}$	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule $H$	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line $1^2$ If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions $24b-24d$ and complete Schedule K. If "No," go to line $25$	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If</i> "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part $IV$	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part $I$	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section $512(b)(13)$ ?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	30	Yes	

Dowl M	Statements Describing Other TDS Filings and Tay (	Compliance
Paru V	Statements Regarding Other IRS Filings and Tax (	Jumphance

	Check if Schedule O contains a response to any question in this Part V		. [	
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	<b>1a</b> 3			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
b	return			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		Νo
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
а	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities			
	account)?	4a		Νo
b	If "Yes," enter the name of the foreign country •			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . $$ .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
h	organization solicit any contributions that were not tax deductible?			
ט	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	_		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7.0		140
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		Νo
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f		No
h	required?	7g 		
	Form 1098-C?	7h		
	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
ט ט	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
***	<b>Note.</b> All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is licensed to issue qualified health plans			
С	Enter the aggregate amount of reserves on hand  13c			
<del>1</del> a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14b		

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

Check if Schedule O contains a response to any question in this Part VI . . . . . . . . . . . . . .

Se	ection A. Governing Body and Management						
			Yes	No			
1_	Enter the number of voting members of the governing heady at the and of the tay						
1a	Enter the number of voting members of the governing body at the end of the tax year						
b	Enter the number of voting members included in line 1a, above, who are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No			
4							
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No			
6	Did the organization have members or stockholders?	6	Yes				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	The governing body?	8a	Yes				
b	Each committee with authority to act on behalf of the governing body?	8b		No			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O						
	ection B. Policies (This Section B requests information about policies not required by the Internal						
Re	evenue Code.)						
			Yes	No			
	Did the organization have local chapters, branches, or affiliates?	10a		No			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes				
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give	401	,				
_	rise to conflicts?	12b	Yes				
С	ın Schedule O how this was done	12c	Yes				
13	Did the organization have a written whistleblower policy?	13	Yes				
14	Did the organization have a written document retention and destruction policy?	14		No			
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official	15a	Yes				
Ь	Other officers or key employees of the organization	15b	Yes				
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its						
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b					
Se	ection C. Disclosure						
17							
4.0	Section 6104 requires an organization to make its Form 1022 (or 1024 if applicable) 990, and 990, T (501/c)						

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply 
  ✓ Own website. ✓ Another's website. ✓ Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►
  DAVID SILVERMAN
  225 CRISTIANI ST
  CRANFORD,NJ 07016
  (908) 276-7300

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average hours per week (describe hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		11130)	organizations
(1) ED BUCKNER FORMER PRESIDENT	2 00	х						0	0	0
(2) DAVID SILVERMAN PRESIDENT	40 00	Х		Х				94,425	0	26,788
(3) KATHLEEN JOHNSON VICE PRESIDENT	2 00	х		Х				0	0	0
(4) WAYNE AIKEN DIRECTOR	2 00	х						0	0	0
(5) CHRIS ALLEN DIRECTOR	2 00	х						0	0	0
(6) NEAL CARY CHAIRPERSON	2 00	х		Х				0	0	0
(7) FRANK ZINDLER DIRECTOR	2 00	х						0	0	0
(8) NOEL SCOTT DIRECTOR	2 00	Х						0	0	0
(9) EDWIN KAGAN DIRECTOR	2 00	X						0	0	0
(10) ELLEN BIRCH DIRECTOR	2 00	Х						0	0	0
(11) MARK DUNN DIRECTOR	2 00	х						0	0	0
(12) MONTY GAITHER DIRECTOR	2 00	х						0	0	0
(13) BLAIR SCOTT DIRECTOR	2 00	х						0	0	0
(14) JAMILA BEY DIRECTOR	2 00	Х						0	0	0
(15) INDRA ZUNO DIRECTOR	2 00	Х						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	<b>(A)</b> Name and Title	(B) A verage hours per week (describe	unles an	on (d e tha	n on son er a	e bo ıs bo nd a	x, oth		(D Report compend from organizat 2/1099-	able sation the ion (W-	(E) Reportable compensation from related organizations (W- 2/1099-	С	<b>(F)</b> Estima nount o ompens from t ganizati	ted f other sation the on and
		hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former			MISC)	c	relate organiza	
												-		
1b	Sub-Total				•	•		<b>•</b>						
d	=			•	•	·		<u>-</u>		94,425		0		26,788
2	Total number of individuals (incl \$100,000 of reportable compens					ted	above	) who	received	more tha	n			
													Yes	No
3	Did the organization list any <b>form</b> on line 1a? <i>If</i> "Yes," complete Sch							ee, o •	r highest c	ompens	ated employee	3		No
4	For any individual listed on line 1 organization and related organization individual											4		No
5	Did any person listed on line 1a services rendered to the organiz									ization d	r individual for	5		No
Se	ection B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	highest comper the organizatio												
	Nan	(A) ne and business add	dress							Descr	(B) iption of services		(C) Compen	
	Total number of independent conti \$100,000 of compensation from t			ot lır	nıte	d to	those	liste	d above) w	ho receiv	ed more than			

Part v	<u> </u>	Statement of Revenue					
	Τ -			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
\$\$	1a	Federated campaigns 1a					
速量	ь	Membership dues 1b	136,960				
ಕ್ಷ	l c	Fundraising events 1c					
ु ह							
ਠੰਾਂਛ	d	Related organizations 1d					
気管	e	Government grants (contributions) 1e					
ᅙᇎ	f	All other contributions, gifts, grants, and <b>1f</b> similar amounts not included above	1,294,571				
≅₹	g	Noncash contributions included in					
돌유		lines 1a-1f \$					
Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a-1f	▶	1,431,531			
			Business Code				
a E	_		Business Code				
eg ea	2a	CONVENTION	900099	146,802	146,802		
æ	b						
g.	c						
Ē	d						
ğ	e						
Program Serwce Revenue		All other program comuse reverse					
Š	f	All other program service revenue					
ᇫ	g	Total. Add lines 2a-2f		146,802			
	3	Investment income (including dividend					
		and other similar amounts)	-	71,915			71,915
	4	Income from investment of tax-exempt bond p	<u> </u>				
	5	Royalties					
		(ı) Real	(II) Personal				
	6a	Gross rents	(II) I CISOIIdi				
	ь	Less rental					
	"	expenses					
	C	Rental income or (loss)					
	d	Net rental income or (loss)	🛌				
		(ı) Securities	(II) Other				
	7a	Gross amount 1,176,671					
		from sales of assets other					
		than inventory					
	Ь	Less cost or 1,140,666 other basis and					
		sales expenses					
	C	Gain or (loss) 36,005		25.005			25.005
	d	Net gain or (loss)	▶	36,005			36,005
4.	8a	Gross income from fundraising					
Ĕ		events (not including \$					
₫.		of contributions reported on line 1c)					
چَ		See Part IV, line 18					
Other Revenue		a					
ŧ	Ь	Less direct expenses b					
0	С	Net income or (loss) from fundraising e	vents 🟲				
	9a	Gross income from gaming activities					
		See Part IV, line 19					
		a					
	b	Less direct expenses b	utua b				
	C 10-	Net income or (loss) from gaming activ	ides				
	10a	Gross sales of inventory, less returns and allowances					
		a a	70,819				
	ь	Less cost of goods sold <b>b</b>	15,952				
	c	Net income or (loss) from sales of inve		54,867	54,867		
	⊢	Miscellaneous Revenue	Business Code	,	-,		
	11a		900099	16,422	16,422		
		MISC	300033	10,122	10,122		
	Ь						
	C				_		
	d	All other revenue					
	e	Total. Add lines 11a-11d		16,422			
			*	10,722			
	12	<b>Total revenue.</b> See Instructions	· •	1,757,542	218,091	0	107,920

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX

Do no	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				·
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	121,213	84,849	18,182	18,182
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	93,488	65,442	14,023	14,023
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	9,955	6,968	1,494	1,493
10	Payroll taxes	15,401	10,781	2,310	2,310
11	Fees for services (non-employees)				
а	Management				
b	Legal	53,954	37,768	8,093	8,093
c	Accounting	24,307	17,015	3,646	3,646
d	Lobbying				
e	Professional fundraising See Part IV, line 17				_
f	Investment management fees				
g	Other	5,795	4,057	869	869
12	Advertising and promotion	115,460	115,460		
13	Office expenses	11,986	8,390	1,798	1,798
14	Information technology	28,022	21,017	4,203	2,802
15	Royalties	,	,	·	
16	Occupancy				
17	Travel	45,594	22,797		22,797
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				-
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	21,827	15,279	3,274	3,274
23	Insurance	6,974		6,974	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	-7		-7	
а	CONVENTION COSTS	113,919	113,919		
b	PRINTING	101,724	101,724		
c	BUILDING EXPENSE	29,824	20,876	4,474	4,474
d	POSTAGE AND SHIPPING	19,960	13,972	2,994	2,994
e					
f	All other expenses	57,783	35,956	18,852	2,975
25	Total functional expenses. Add lines 1 through 24f	877,186	696,270	91,186	89,730
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				rm <b>990</b> (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 62.723 234,585 Cash—non-interest-bearing . . . . . . . . . . . . 1 1 2 2 3 3 101.076 4 140.006 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . . . 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 Schedule L . . . . . 7 107,402 8 148.230 9 9 Prepaid expenses and deferred charges . . . . 1,113,014 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 447,210 556,599 b Less accumulated depreciation . . . . 10c 665,804 11 11 1,045,678 1,681,710 12 12 Investments—other securities See Part IV, line 11 . . . . . . 13 13 Investments—program-related See Part IV, line 11 . . 14 14 Intangible assets . . . . . . . . . 15 15 1,873,478 2,870,335 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 31,710 64,870 17 17 Accounts payable and accrued expenses . 18 18 19 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L $\ldots$ . $\ldots$ . $\ldots$ 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 24 Unsecured notes and loans payable to unrelated third parties . . . . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 5,865 25 185,863 D . . . . . 26 37,575 26 250,733 **Total liabilities.** Add lines 17 through 25 . . . . . Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 1,835,903 27 2,565,627 Unrestricted net assets . . . . 28 53,975 28 Temporarily restricted net assets . . . . . Fund 29 29 Permanently restricted net assets . . . . Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds . . . . . 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances . . . . . 1.835.903 33 2.619.602 34 Total liabilities and net assets/fund balances . . . . . 1.873.478 34 2.870.335

	Check if Schedule O contains a response to any question in this Part XI			. [고	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1.3	757,54
2	Total expenses (must equal Part IX, column (A), line 25)	2			877,18
3	Revenue less expenses Subtract line 2 from line 1	3			880,35
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) $\cdot$ .	4		1,8	835,90
5	Other changes in net assets or fund balances (explain in Schedule O)	5			-96,65
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, col (B))	umn <b>6</b>		2,6	519,60
Par	rt XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? $$ .		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, exp Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year won a separate basis, consolidated basis, or both	ere issued			
	✓ Separate basis       Consolidated basis       □ Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth Single Audit Act and OMB Circular A-133?	ın the	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits .	the required	3b		

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DLN: 93493320028392

**Employer identification number** 

OMB No 1545-0047

2011

Open to Public Inspection

### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

**Public Charity Status and Public Support** 

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name of the organization AMERICAN ATHEISTS INC

EISTS INC

Pai	rt I	Reas	on for Pu	blic Charity Sta	tus (All ord	nanizations	must comi	olete this n	174-24665 art ) See ir		
				te foundation becaus						isti detions	
1	Ē			ion of churches, or a					•		
2	Ė		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)								
3				perative hospital se				n 170(b)(1)	(A)(iii).		
4	<u></u>			h organization opera						1)(A)(iii). F	nter the
-	,			ity, and state	,					_/(/(/-	
5	Γ	_	•	erated for the benefication (A)(iv). (Complete P	_	or universit	ty owned or o	perated by a	government	al unit desc	rıbed ın
6	_			local government o	· ·	al unit docc	ribad in <b>sasti</b>	on 170(b)(1	\( <b>A</b> \(\\\\		
7	<u> </u>	An orga describ	anızatıon th oed ın	at normally receives	a substantia					rom the gene	eral public
	_			(A)(vi) (Complete P		A ) () (C.o.m	anlata Davt II				
8	<u> </u>			described in <b>sectio</b>					utiona mam	harabın faac	
9	ı			at normally receives							
		•		rities related to its e	•	=		•			
				oss investment inco						tax) from bu	sinesses
	_			ganızatıon after June 							
10	<u> </u>			ganized and operate							
11	1	one or the box	more public	ganized and operate ly supported organiz ibes the type of supp <b>b</b> Type I	ations descr porting organ	ibed in secti ization and d	on 509(a)(1)	or section! s 11e throug	509(a)(2) So gh 11h	ee <b>section 5</b>	
e	Γ	other the section	han foundat n 509(a)(2)	ox, I certify that the ion managers and ot	her than one	or more pub	licly support	ed organızat	ions describ	ed in section	n 509(a)(1) or
f g		check	this box	received a written d 2006, has the organ						iii supportii	ng organization,
			ng persons?								
				rectly or indirectly o				persons des	cribed in (ii)		Yes No
		•		governing body of th		_	ation?			11g	
		• •	•	er of a person descri	٠,					11g	
				lled entity of a perso						11g(	(iii)
h		Provide	the followi	ng information about	the supporte	ed organizat	ion(s)				
(i) Name suppoi organiz		organizat (ii) (described orted EIN lines 1-9 a zation or IRC sec		(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv)  Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi)  Is the organization in col (i) organized in the US?		(vii) A mount of support?
				(see (nstructions))	Yes	No	Yes	No	Yes	No	1
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
											1
Total											1

instructions

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify

	under Part III. If the	organization	fails to qualify ι	inder the tests	listed below, ple	ease co	mplete [	Part III.)
	ection A. Public Support	1	<del></del>		Г Г			
Cale	endar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	( <b>d)</b> 2010	<b>(e)</b> 2	011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	246,71	.1 963,935	507,796	424,377	1	,431,531	3,574,350
_	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities							
3	furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3	246,71	.1 963,935	507,796	424,377	1	,431,531	3,574,350
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the							258,142
	amount shown on line 11, column							
6	(f) <b>Public Support.</b> Subtract line 5 from line 4							3,316,208
Se	ection B. Total Support							
Cale	endar year (or fiscal year	<b>(a)</b> 2007	<b>(b)</b> 2008	(c) 2009	( <b>d)</b> 2010	<b>(e)</b> 20	11	<b>(f)</b> Total
7	beginning in) A mounts from line 4	246,711	963,935	507,796	424,377	1	431,531	3,574,350
8	Gross income from interest,		,	,	12.42.1		,,	
	dividends, payments received on securities loans, rents, royalties and income from similar sources	64	744		52,572		71,915	125,295
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets		17,495	15,200				32,695
11	Total support (Add lines 7 through 10)							3,732,340
12	Gross receipts from related activition	es, etc (See ins	tructions )			12		688,742
13	First Five Years If the Form 990 is to check this box and stop here		· 	, thırd, fourth, or f	ifth tax year as a !	501(c)(3	3) organız	zation, ▶┌
	ection C. Computation of Pub			11 column (f))		1 1		
14	Public Support Percentage for 2011	-		TT COMMIN (T))		14		88 850 %
15	Public Support Percentage for 2010	•	•			15		89 950 %
	33 1/3% support test—2011. If the and stop here. The organization qua 33 1/3% support test—2010. If the box and stop here. The organization	lıfıes as a public organizatıon did	ly supported orga not check the bo	nization x on line 13 or 16				<b>►</b> ▼
l7a	10%-facts-and-circumstances test- is 10% or more, and if the organization Part IV how the organization mee organization	<b>–2011.</b> If the org tion meets the "f	anization did not facts and circums	check a box on lir tances" test, che	ck this box and <b>st</b>	op here.	Explain	ted ▶□
b 18	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ Explain in Part IV how the organizat supported organization Private Foundation If the organizati	iization meets th tion meets the "f	e "facts and circu facts and circums	mstances" test, o tances" test The	check this box and organization qual	d <b>stop he</b> ifies as a	e <b>re.</b> a publicly	.,

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

**▶**[

Part IV	<b>Supplemental Information.</b> Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

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OMB No 1545-0047

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#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

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

ilema	F Attach to Fo	orm 990. F See separate instructions.	Inspection
	me of the organization RICAN ATHEISTS INC		Employer identification number
,			74-2466507
Pa	rt I Organizations Maintaining Donor Ad		unds or Accounts. Complete if the
	organization answered "Yes" to Form 99	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(4) 2 500 4 400 5	(c) takes and concerned
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advifunds are the organization's property, subject to the		or advised Yes No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit	efit of the donor or donor advisor, or for ar	ny other purpose Yes No
Pa	rt II Conservation Easements. Complete		o Form 990, Part IV, line 7.
2	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreating Protection of natural habitat  Preservation of open space  Complete lines 2a-2d if the organization held a quality specified by the last day of the tax years.	on or pleasure)  Preservation of an Preservation of a c	historically importantly land area certified historic structure of a conservation
	easement on the last day of the tax year	I	Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified his	toric structure included in (a)	2c
d	Number of conservation easements included in (c) a	equired after 8/17/06	2d
3	Number of conservation easements modified, transfe	، rred, released, extinguished, or terminate.	ed by the organization during
	the taxable year ▶		
4	Number of states where property subject to conserva	ation easement is located <b>&gt;</b>	
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds	the periodic monitoring, inspection, hand	dling of violations, and
6	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easem	nents during the year 🛌
7	A mount of expenses incurred in monitoring, inspecting.	ng, and enforcing conservation easements	s during the year
8	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion Yes No
9	In Part XIV, describe how the organization reports co balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easen	he footnote to the organization's financial	
Par	Complete if the organization answered '	ns of Art, Historical Treasures, 'Yes" to Form 990, Part IV, line 8.	or Other Similar Assets.
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	ch in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ii	
	(i) Revenues included in Form 990, Part VIII, line 1		<b>►</b> \$
	(ii) Assets included in Form 990, Part X		<b>▶</b> \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA		
а	Revenues included in Form 990, Part VIII, line 1		<b>▶</b> -\$

**b** Assets included in Form 990, Part X

Par	Organizations Maintaining Co	llections of Art,	His	tori	cal 1	reasu	<u>res, or Ot</u>	<u>her</u>	<u>Similar Asse</u>	ts (cc	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	ofth	ne fol	lowing	g that are	e a significar	nt us	e of its collection		
а	Public exhibition		d	Γ	Loa	n or exch	nange progra	ms			
b	Scholarly research		e	$\Gamma$	Oth	er					
c	▼ Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n ho	w the	y furti	her the o	rganızatıon's	exe	empt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									Yes	√ No
Par	TELLIN TERMINATION TO SERVICE TO THE TELLINION THE						answered	"Ye	es" to Form 990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	dıary	ford	ontril	outions o	rotherasse	ts n	ot	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the f	ollov	ving t	able		_				
							_		Amou	nt	
C	Beginning balance						<u> </u>	lc			
d	Additions during the year						<u> </u>	ld			
е	Distributions during the year						_1	le			
f	Ending balance						_ 1	Lf			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						Γ,	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	1									
Pa	rt V Endowment Funds. Complete										
_		(a)Current Year	(b	<b>)</b> Prior	Year	(c)Tw	o Years Back	(d)⊤	hree Years Back (e)	Four Ye	ears Back
1a	Beginning of year balance										
Ь	Contributions										
С	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held a	S								
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🕨										
c	Term endowment ▶										
За	Are there endowment funds not in the posses organization by	ssion of the organiza	tion	that	are he	eld and a	dmınıstered	for t	he	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(II), are the related organizatio	ns listed as required	l on S	Sche	dule R	?			3b		Ī
4	Describe in Part XIV the intended uses of th	e organızatıon's end	owm	ent fi	ınds						
Par	t VI Land, Buildings, and Equipme	ent. See Form 990	0, Pa	ırt X	, lıne	10.					
	Description of property					or other estment)	(b)Cost or ot basis (other		(c) Accumulated depreciation	( <b>d)</b> B	ook value
1a	Land						239,	871			239,871
b	Buildings						862,	702	445,685		417,017
c	Leasehold improvements							1			
d	Equipment						10,	441	1,525		8,916
e	Other							T			
Tota	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, colum	nn (B	), line	10(c)	).)			▶		665,804
									Schedule D (F	orm 9	90) 2011

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests (3)Other		
(A) CASH EQUIVALENTS	220,659	F
(B) MUTUAL FUNDS	933,399	F
(C) EQUITIES	376,131	F
(D) FIXED INCOME	151,521	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	, ,	
Part VIII Investments—Program Related. Se		13. (c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )	•	
Part IX Other Assets. See Form 990, Part X, III		
(a) Descri	ption	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line i	15.)	
Part X Other Liabilities. See Form 990, Part > 1 (a) Description of Liability		
Federal Income Taxes	(b) A mount	
DUE TO RELATED ENTITY	185,863	
	i l	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,757,542
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	877,186
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	880,356
4	Net unrealized gains (losses) on investments	4	-96,657
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV )	8	
9	Total adjustments (net) Add lines 4 - 8	9	-96,657
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	783,699
Par	<b>XII</b> Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	1,676,837
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	-96,657
3	Subtract line <b>2e</b> from line <b>1</b>	3	1,773,494
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines <b>4a</b> and <b>4b</b>	<b>4</b> c	-15,952
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	1,757,542
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	893,138
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	_	
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	0
3	Subtract line <b>2e</b> from line <b>1</b>	3	893,138
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines <b>4a</b> and <b>4b</b>	4c	-15,952
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18 )	5	877,186

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
	PART III, LINE 1A	THE ORGANIZATION MAINTAINS A LIBRARY THAT SPECIALIZES IN THE PRESERVATION OF ATHEIST, FREE THOUGHT, RATIONALIST, SECULARIST, SKEPTIC, HUMANIST, AGNOSTIC AND DEIST MATERIALS THE LIBRARY AND ARCHIVES CURRENTLY HOUSE NEARLY 25,000 BOOKS AND OVER 500,000 PAMPHLETS, BOOKLETS, PERIODICALS, LETTERS, PHOTOGRAPHS, AND OTHER MATERIAL RELEVANT TO THE ORGANIZATION'S MISSION THE VALUE OF THE LIBRARY AND ARCHIVES IS BASED ON AN APPRAISED VALUE AND, THEREFORE, IS NOT PRESENTED IN THE STATEMENT OF FINANCIAL POSITION THE LIBRARY IS OPEN TO THE PUBLIC FOR RESEARCH
	PART III, LINE 4	THE LIBRARY IS MAINTAINED TO AID IN THE PROMOTION AND EDUCATION OF THE COMPLETE AND ABSOLUTE SEPARATION OF CHURCH AND STATE
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	AS OF DECEMBER 31, 2011, MANAGEMENT BELIEVES THAT BASED ON THE EVALUATION OF THE ORGANIZATION'S TAX POSITIONS THAT ANY ADDITIONAL LIABILITY AS A RESULT OF UNCERTAIN TAX POSITIONS WOULD NOT BE MATERIAL MANAGEMENT CONTINUALLY EVALUATES EXPIRING STATUTES OF LIMITATIONS, CHANGES IN TAX LAW, AND NEW AUTHORITATIVE RULINGS TO ASSIST US IN EVALUATING THE ORGANIZATION'S TAX POSITION ACCRUED INTEREST AND PENALTIES ASSOCIATED WITH UNCERTAIN TAX POSITIONS, IF ANY, WOULD BE RECOGNIZED AS PART OF THE INCOME TAX PROVISION INCOME TAX RETURNS ARE FILED IN THE U S FEDERAL AND STATE INCOME TAX RETURNS PRIOR TO FISCAL YEAR 2008 ARE CLOSED
PART XII, LINE 4B - OTHER ADJUSTMENTS		COST OF SALES -15,952
PART XIII, LINE 4B - OTHER ADJUSTMENTS		COST OF SALES -15,952

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DLN: 93493320028392

NO 1343-002

2011

OMB No 1545-0047

SCHEDULE O (Form 990 or 990-EZ)

Name of the organization

AMERICAN ATHEISTS INC

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Supplemental Information to Form 990 or 990-EZ

Open to Public
Inspection

► Attach to Form 990 or 990-EZ.

Employer identification number

74-2466507

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS MEMBERS WHO PAY FOR THE SERVICES THE ORGANIZATION PROVIDES, BUT THEY DO NOT HAVE THE POWER TO VOTE ON THE BOARD, PRESIDENT OR ANY DECISIONS THAT WOULD AFFECT THE ORGANIZATION
	FORM 990, PART VI, SECTION A, LINE 8B	THE BOARD OF DIRECTORS IS THE ONLY GOVERNING BODY THE MINUTES ARE DOCUMENTED BY A DIRECTOR DURING EACH MEETING AND ARE APPROVED AT THE SUBSEQUENT MEETING
	FORM 990, PART VI, SECTION B, LINE 11	FORM 990 IS REVIEWED BY THE TREASURER AND A COPY OF THE 990 IS GIVEN TO THE BOARD PRIOR TO FILING
	FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION AND ITS BOARD OF DIRECTORS MONITOR ANY POTENTIAL CONFLICTS OF INTEREST ON AN ONGOING BASIS
	FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION OF THE PRESIDENT IS DETERMINED BY THE BOARD OF DIRECTORS BASED ON THE PRESIDENT'S PERFORMANCE FROM THE PRIOR YEAR IT IS AGREED UPON THROUGH A VOTE AND THE PRESIDENT SIGNS A WRITTEN CONTRACT EACH YEAR THE COMPENSATION OF THE EMPLOYEES IS DETERMINED BY THE PRESIDENT WITH APPROVAL FROM THE BOARD OF DIRECTORS
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -96,657
	FORM 990, PART XII, LINE 2C	THE BOARD REVIEWS THE 990 AND FINANCIAL STATEMENTS PRIOR TO FILING

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DLN: 93493320028392

SCHEDULE R (Form 990)

Department of the Treasury

## **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2011

OMB No 1545-0047

Open to Public
Inspection

Name of the organization AMERICAN ATHEISTS INC					lentification number		
Part I Identification of Disregarded Entities (	Complete if the organization	on answered "Yes"	on Form 990, Pa	74-246650 rt IV, line 33.)	J /		
<b>(a)</b> Name, address, and EIN of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Cor more related tax-exempt organizations d	Organizations (Complete uring the tax year.)	ıf the organization	answered "Yes"	on Form 990, Pa	art IV, line 34 becau	se it had	one
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Exempt Code section	(e) Public charity statu (if section 501(c)(3	(f) Direct controlling entity	Section 5 cont	g) 512(b)(13 trolled nization No
(1) REASON RALLY COALITION  225 CRITIANI STREET  CRANFORD, NJ 07016 27-5234482	TO UNIFY, ENERGIZE, AND EMBOLDEN SECULAR PEOPLE NATIONWIDE	NJ	501(C)(3)	LINE	E 9 N/A	Tes	No

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 3
	because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	·	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	<b>(f)</b> Share of total income			) rtionate ions?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		<b>(k)</b> Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	<b>(h)</b> Percentage ownership

(5)

(6)

Part	Transactions With Related Organizations (Complete if the organization answered "Y	'es" on Form 990, Pa	rt IV, line 34, 35, 3	5A, or 36.)						
No	te. Complete line 1 if any entity is listed in Parts II, III or IV					Yes	No			
1 Durir	ng the tax year, did the orgranization engage in any of the following transactions with one or more related org	janizations listed in Part	ts II-IV?							
a R	eceipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity				1a		No			
<b>b</b> G	ft, grant, or capital contribution to related organization(s)				1b		No			
<b>c</b> G	ft, grant, or capital contribution from related organization(s)				1c		No			
<b>d</b> Lo	pans or loan guarantees to or for related organization(s)				<b>1</b> d		No			
<b>e</b> Lo	oans or loan guarantees by related organization(s)				1e		No			
<b>f</b> Sa	ale of assets to related organization(s)				1f		No			
g P	urchase of assets from related organization(s)				<b>1</b> g		No			
h E	change of assets with related organization(s)				1h		No			
i Le	ase of facilities, equipment, or other assets to related organization(s)				1i		No			
i le	ase of facilities, equipment, or other assets from related organization(s)				1j		No			
-	erformance of services or membership or fundraising solicitations for related organization(s)				1k		No			
	Performance of services or membership or fundraising solicitations for related organization(s)  Performance of services or membership or fundraising solicitations by related organization(s)									
	naring of facilities, equipment, mailing lists, or other assets with related organization(s)				1m		No			
	naring of paid employees with related organization(s)				1n		No			
o R	eimbursement paid to related organization(s) for expenses				10		No			
<b>p</b> R	eimbursement paid by related organization(s) for expenses				1р		No			
<b>q</b> 0	ther transfer of cash or property to related organization(s)				<b>1</b> q	Yes				
	ther transfer of cash or property from related organization(s)				1r		No			
2 11	the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	(b)	tionships and transact		(d)					
	(a) Name of other organization	Transaction type(a-r)	(c) Amount involved	Method of dete	emin olved		unt			
(1) REAS	ON RALLY COALITION	Q	185,863	CASH						
2)										
3)										
4)		1	1	I						

### Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Disproprtionate alloca	ations?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	<b>j)</b> eral or aging :ner?	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No					
													·				

Schedule R (Form 990) 2011

### Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2011

### **Additional Data**

Software ID: Software Version:

**EIN:** 74-2466507

Name: AMERICAN ATHEISTS INC

Form 990, Special Condition Description:

**Special Condition Description**