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Form 990

Department of the Treasury  
Internal Revenue Service

## 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)

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

OMB No. 1545-0047

2009

Open to Public  
Inspection

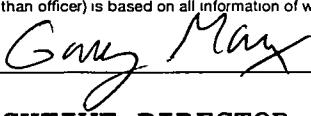
## A For the 2009 calendar year, or tax year beginning and ending

B Check if applicable		C Name of organization <b>FAITH AND FREEDOM COALITION INC</b>		D Employer identification number <b>27-0182697</b>	
<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input checked="" type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending		Please use IRS label or print or type Doing Business As Number and street (or P.O. box if mail is not delivered to street address) <b>3175 SATELLITE BLVD STE 325</b>		Room/suite	E Telephone number <b>770-622-1501</b>
		City or town, state or country, and ZIP + 4 <b>DULUTH, GA 30096-9017</b>			G Gross receipts \$ <b>743,015.</b>
		F Name and address of principal officer <b>RALPH E. REED, JR.</b> <b>SAME AS C ABOVE</b>			H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
					H(b) Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list (see instructions)
					H(c) Group exemption number ►
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (4) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		J Website: ► <b>WWW.FFCOALITION.COM</b>		K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ► L Year of formation: <b>2009</b> M State of legal domicile: <b>GA</b>	

## Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities <b>FAITH AND FREEDOM COALITION IS COMMITTED TO EDUCATING AND INFORMING PEOPLE AT THE GRASSROOTS LEVEL</b>		
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	3
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	2
	5 Total number of employees (Part V, line 2a)	5	3
	6 Total number of volunteers (estimate if necessary)	6	5
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	RECEIVED	
	9 Program service revenue (Part VIII, line 2g)	30,000.00 2011	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	206.	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	743,015.	
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	144,842.	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	Prior Year	
	14 Benefits paid to or for members (Part IX, column (A), line 4)	Current Year	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	742,809.	
	16a Professional fundraising fees (Part IX, column (A), line 11e)	206.	
	b Total fundraising expenses (Part IX, column (D), line 25) ► <b>33,666.</b>	57,223.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	678,356.	
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	880,421.	
	19 Revenue less expenses Subtract line 18 from line 12	<137,406. >	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	
	21 Total liabilities (Part X, line 26)	End of Year	
	22 Net assets or fund balances Subtract line 21 from line 20	46,068.	
		183,474.	
<137,406. >			

## Part II Signature Block

I Sign Here Name Line	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			
	 Signature of officer <b>GARY MARX, EXECUTIVE DIRECTOR</b> Type or print name and title			
	Date <b>10/17/11</b>			
Paid C Preparer's Use Only	Preparer's signature ► 	Date <b>10/13/11</b>	Check if self-employed ► <input type="checkbox"/>	Preparer's identifying number (see instructions)
				EIN ►
				Phone no. ► <b>770-457-6606</b>
Firm's name (or yours if self-employed), address, and ZIP + 4 <b>CARR, RIGGS &amp; INGRAM, LLC</b> <b>4360 CHAMBLEE DUNWOODY RD., SUITE 420</b> <b>ATLANTA, GA 30341</b>				

May the IRS discuss this return with the preparer shown above? (see instructions)

932001 02-04-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2009)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

G13 N6



## Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  
If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, Schedule of Contributors?

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

4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II

5 **Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III

6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I

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

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

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

10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V

11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable

- Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.
- 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
- 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
- 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
- Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
- 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? If "Yes," complete Schedule D, Part X

12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII

12A Was the organization included in consolidated, independent audited financial statements for the tax year?  
If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?
 

- b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I

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 United States? If "Yes," complete Schedule F, Part II

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 United States? If "Yes," complete Schedule F, Part III

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

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

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

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

	Yes	No
1		X
2	X	
3		X
4		
5		X
6		X
7		X
8		X
9		X
10		X
11		X
12		X
13		X
14a		X
14b		X
15		X
16		X
17	X	
18		X
19		X
20		X

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## Part IV Checklist of Required Schedules (continued)

	Yes	No
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? If "Yes," complete Schedule I, Parts I and II	21 X	
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 X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23 X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a X	
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 X	
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b X	
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 X	
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? If "Yes," complete Schedule L, Part III	27 X	
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)		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a X	
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b X	
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c X	
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29 X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30 X	
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31 X	
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32 X	
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33 X	
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34 X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35 X	
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	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37 X	
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38 X	

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## Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable	1a	0
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	3
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)		X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	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, securities account, or other financial account)?  If "Yes," enter the name of the foreign country: ►  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	4a	X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
5b	If any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	X
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>	7a	X
a	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?	7b	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c	X
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e	X
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7h	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	8	
8	<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?	9a	
9	<b>Sponsoring organizations maintaining donor advised funds.</b>	9b	
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	<b>Section 501(c)(7) organizations.</b> Enter.	10a	
a	Initiation fees and capital contributions included on Part VIII, line 12	10b	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	<b>Section 501(c)(12) organizations.</b> Enter	11a	
a	Gross income from members or shareholders	11b	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> 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 year	12b	

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

### Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body	3	
1b	Enter the number of voting members that are independent	2	
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?		X
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?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
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		X

### Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	X	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
13	Does the organization have a written whistleblower policy?		
14	Does the organization have a written document retention and destruction policy?	X	
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?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization		X
	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?		
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		X
16b			

### Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed ►GA
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
	<input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►
	<b>MELISSA HUNKIN - 770-622-1501</b>
	<b>3175 SATELLITE BLVD STE 325, DULUTH, GA 30096</b>

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## **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. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation per -0- in columns (D), (E), and (F) if no compensation was paid

Enter -0- in columns (D), (E), and (F) if no compensation was paid

- List all of the organization's **current** key employees. 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

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

Check this box if the organization did not compensate any current officer, director, or trustee.

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

**1b Total**

45,577.

0

0.

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

0

- 3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual*
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*

## **Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 0

0

Part VIII Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	742,809.			
	g Noncash contributions included in lines 1a-1f \$					
	h Total. Add lines 1a-1f		742,809.			
Program Service Revenue	2 a	Business Code				
	b					
	c					
	d					
	e					
	f All other program service revenue					
g Total. Add lines 2a-2f		►				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	►	206.		206.	
	4 Income from investment of tax-exempt bond proceeds	►				
	5 Royalties	►				
	6 a Gross Rents	(i) Real	(ii) Personal			
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	b Less cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
b Less direct expenses	b					
c Net income or (loss) from fundraising events	►					
9 a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses	b					
c Net income or (loss) from gaming activities	►					
10 a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory	►					
Miscellaneous Revenue	Business Code					
11 a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d	►					
12 Total revenue See instructions.	►	743,015.	0.	0.	206.	

## 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).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	144,842.	144,842.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	45,577.		45,577.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		9,012.		9,012.
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	2,634.		2,634.	
11 Fees for services (non-employees)				
a Management				
b Legal	8,436.		8,436.	
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	45,279.	8,678.	36,601.	
12 Advertising and promotion	34,722.	34,722.		
13 Office expenses	157.		149.	8.
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	32,068.	17,967.	8,017.	6,084.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	6,085.	3,567.	1,521.	997.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a POSTAGE/MAILINGS	448,467.	399,653.	26,391.	22,423.
b PRINTING/COPYING	48,544.	5,220.	40,897.	2,427.
c TELEPHONE/TELETHON	34,548.	29,726.	3,095.	1,727.
d PAYROLL FEES	9,305.	0.	9,305.	0.
e LIST RENTAL	5,473.	5,473.	0.	
f All other expenses	5,272.		5,272.	
25 Total functional expenses. Add lines 1 through 24f	880,421.	649,848.	196,907.	33,666.
26 Joint costs. Check here ► <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

## Part X Balance Sheet

		(A) Beginning of year		(B) End of year
	1 Cash - non-interest-bearing		1	40,117.
	2 Savings and temporary cash investments		2	5,951.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		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 Schedule L			6
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
Assets	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b		10c
	11 Investments - publicly traded securities		11	
	12 Investments - other securities See Part IV, line 11		12	
	13 Investments - program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11		15	
	16 Total assets. Add lines 1 through 15 (must equal line 34)		0.	16 46,068.
	17 Accounts payable and accrued expenses		17	183,474.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
Liabilities	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25		0.	26 183,474.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	<137,406.>
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	0.	33	<137,406.>
	34 Total liabilities and net assets/fund balances	0.	34	46,068.

Form 990 (2009)

## Part XI Financial Statements and Reporting

	Yes	No			
1 Accounting method used to prepare the Form 990	<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Accrual	<input type="checkbox"/> Other _____		
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O					
2a Were the organization's financial statements compiled or reviewed by an independent accountant?					
b Were the organization's financial statements audited by an independent accountant?					
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the 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, explain in Schedule O					
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both					
<input checked="" type="checkbox"/> Separate basis	<input type="checkbox"/> Consolidated basis	<input type="checkbox"/> Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?					
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits					
3a	<input checked="" type="checkbox"/>				
3b					

Form 990 (2009)

**SCHEDULE G**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding  
Fundraising or Gaming Activities**

OMB No 1545-0047

**2009**

Open To Public  
Inspection

Name of the organization

**FAITH AND FREEDOM COALITION INC**

Employer identification number

**27-0182697**

**Part I**

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply

a <input checked="" type="checkbox"/> Mail solicitations	e <input type="checkbox"/> Solicitation of non-government grants
b <input type="checkbox"/> Internet and email solicitations	f <input type="checkbox"/> Solicitation of government grants
c <input checked="" type="checkbox"/> Phone solicitations	g <input type="checkbox"/> Special fundraising events
d <input type="checkbox"/> In-person solicitations	

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
<u>INFOCISION</u>	SOLICIT PHONE PLEDGES	Yes	No	<b>404,281.</b>	<b>404,281.</b>	<b>0.</b>
<u>AMERICAN TARGET ADVERTISING</u>	SOLOCIT THROUGH DIRECT MAIL		X	<b>149,809.</b>	<b>136,564.</b>	<b>13,245.</b>
<b>Total</b>				<b>554,090.</b>	<b>540,845.</b>	<b>13,245.</b>

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing  
NM, MI

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a List events with gross receipts greater than \$5,000

	(a) Event #1 (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col. (c))
Revenue	1 Gross receipts			
	2 Less Charitable contributions			
	3 Gross income (line 1 minus line 2)			
Direct Expenses	4 Cash prizes			
	5 Noncash prizes			
	6 Rent/facility costs			
	7 Food and beverages			
	8 Entertainment			
	9 Other direct expenses			
	10 Direct expense summary Add lines 4 through 9 in column (d)			► ( )
	11 Net income summary Combine line 3, column (d), and line 10			► ( )

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than

\$15,000 on Form 990-EZ, line 6a

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue			
Direct Expenses	2 Cash prizes			
	3 Noncash prizes			
	4 Rent/facility costs			
	5 Other direct expenses			
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7 Direct expense summary Add lines 2 through 5 in column (d)			► ( )
	8 Net gaming income summary Combine line 1, column (d), and line 7			► ( )

9 Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_

Yes No

9a

a Is the organization licensed to operate gaming activities in each of these states?

b If "No," explain \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

10a

b If "Yes," explain \_\_\_\_\_

11 Does the organization operate gaming activities with nonmembers?

11

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

12

13 Indicate the percentage of gaming activity operated in

- a The organization's facility
- b An outside facility

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_

c If "Yes," enter name and address of the third party

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

16 Gaming manager information

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided ► \_\_\_\_\_

 Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ \_\_\_\_\_

17a



# FAITH AND FREEDOM COALITION INC

**Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Use Part IV and Schedule L-1 (Form 990) if additional space is needed

Part 11. Summary Information. Complete this part to provide the information required in Part 1, line 2, and any other additional information

**SCHEDULE O**

(Form 990)

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

OMB No. 1545-0047

**2009**Open to Public  
Inspection

Name of the organization

FAITH AND FREEDOM COALITION INC

Employer identification number

27-0182697**FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:**

ABOUT TIMELY PUBLIC POLICY ISSUES AND ENCOURAGE THEM TO PARTICIPATE IN  
THE LEGISLATIVE PROCESS.

FORM 990, PART VI, SECTION A, LINE 6: INDIVIDUALS REGISTER TO BECOME  
MEMBERS AND RECEIVE REGULAR INFORMATION AND UPDATES. THERE IS ONLY ONE  
CLASS OF MEMBERSHIP AND IS NON-VOTING.

FORM 990, PART VI, SECTION B, LINE 11: A COPY OF FORM 990 IS PROVIDED TO  
THE BOARD UPON REQUEST.

FORM 990, PART VI, SECTION B, LINE 12C: THOSE CHARGED WITH GOVERNANCE ARE  
REQUIRED TO REPORT ANNUALLY ANY INTEREST THAT COULD GIVE RISE TO A CONFLICT  
OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15A: BY CONSULTATION WITH THE CHAIRMAN.

FORM 990, PART VI, SECTION C, LINE 19: ALL ORGANIZATIONAL DOCUMENTS ARE  
MADE AVAILABLE TO THE PUBLIC UPON REQUEST EITHER BE IN PERSON OR BY MAIL.

**AMENDED 990 TAX RETURN**

FAITH AND FREEDOM COALITION HAD A FINACIAL STATEMENT AUDIT PERFORMED  
AFTER THEIR ORIGINAL 2009 990 TAX RETURN WAS FILED. THIS AMENDMENT  
REFLECTS THE CHANGES THAT AROSE FROM THE PERFORMED AUDIT. PLEASE SEE  
THE ATTACHED SCHEDULE FOR CHANGES.

► 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.

FAITH AND FREEDOM COALITION INC

27-0182697

**Part II** **Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year)

65

(a) Name, address, and EIN of related organization

FREEDOM AND VALUES ALLIANCE INC

2:0: BOX 956364

DOULUTH, GA 30095

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**Part III Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year)

### Part III Identification of R

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

**Part V Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1a		X	
1b		X	
1c		X	
1d		X	
1e		X	
1f		X	
1g		X	
1h		X	
1i		X	
1j		X	
1k		X	
1l		X	
1m		X	
1n		X	
1o		X	
1p		X	
1q		X	
1r		X	

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a)	(b)	(c)
Name of other organization(s)	Transaction type (a/r)	Amount involved
(1) FREEDOM AND VALUES ALLIANCE, INC.	C	219,000.
(2)		
(3)		
(4)		
(5)		
(6)		

## Part VI Unrelated Organizations

**Part IV: Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to 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.

FAITH & FREEDOM COALITION, INC (27-0182697)  
 990 Amended Attachment  
 For the period ending December 31, 2009

Form 990 Changes Item In Return	Original Amounts	Amended Amounts	Effect On Return
<b>Pg 1 Changes</b>			
Ln 8 - Contributions & grants (Current Year)	712,309	742,809	30,500
Ln 13 - Grants and similar amounts paid (Current Year)	0	144,842	144,842
Ln 15 - Salaries, other compensation, employee benefits (Current Year)	62,479	57,223	(5,256)
Ln 16b - Total fundraising expenses (Current Year)	0	33,666	33,666
Ln 17 - Other expenses (Current Year)	735,766	678,356	(57,410)
Ln 18 - Total expenses (Current Year)	798,245	880,421	82,176
Ln 19 - Revenue less expenses (Current Year)	(85,730)	(137,406)	(51,676)
Ln 20 - Total Assets (End of Year)	71,129	46,068	(25,061)
Ln 21 - Total Liabilities (End of Year)	126,949	183,474	56,525
Ln 22 - Net Assets or Fund Balances (End of Year)	(55,820)	(137,406)	(81,586)
Siging Officer	Greg Keller	Gary Marx	-
<b>Pg 2 Changes</b>			
Ln 4a - Program Service - Voter Education	774,094	239,278	(534,816) Expenses
	712,309	273,507	(438,802) Grants
Ln 4b - New Program Service - Public Policy Education	0	410,570	410,570 Expenses
	0	469,302	469,302 Grants
<b>Pg 3 Changes</b>			
Ln 17 - Funraising expenses paid of \$15,000 for professional funraising services	NO	YES	- see schedule G
<b>Pg 4 Changes</b>			
Ln 21 - Grants of \$5,000 to organizations	NO	YES	- see schedule I
Ln 34 - Related to Tax-Exempt Entity	NO	YES	- see schedule R
<b>Pg 6 Changes</b>			
Ln 20 - Person who posses books & records	Emily Gibb	Melissa Hunkin	-
<b>Pg 9 Changes</b>			
Ln 1f - All other contributions, gifts, grants, etc	712,309	742,809	30,500
Ln 12 - Total revenue	712,515	743,015	30,500
<b>Pg 10 Changes</b>			
Ln 1 - Grants and other assistance to organizations	0	144,842	144,842 Program Service
	0	0	0 Management & General
	0	0	0 Funraising
	0	0	0 Program Service
Ln 6 - Compensation to officers	0	45,577	45,577 Management & General
	0	0	0 Funraising
Ln 6 - Compensation to other employees	41,092	0	(41,092) Program Service
	10,273	9,012	(1,261) Management & General
	0	0	0 Funraising
Ln 10 - Payroll taxes	10,273	0	(10,273) Program Service
	841	2,634	1,793 Management & General
	0	0	0 Funraising
Ln 11b - Legal fees	5,793	0	(5,793) Program Service
	1,448	8,436	6,988 Management & General
	0	0	0 Funraising
Ln 11g - Other fees	18,624	8,678	(9,946) Program Service
	4,656	36,601	31,945 Management & General
	0	0	0 Funraising
Ln 12 - Advertising & promotion	62,722	24,722	(38,000) Program Service
	0	0	0 Management & General
	0	0	0 Funraising
Ln 13 - Office Expenses	157	0	(157) Program Service
	0	149	149 Management & General
	0	8	8 Funraising
Ln 17 - Travel	25,632	17,967	(7,665) Program Service
	6,408	8,017	1,609 Management & General
	0	6,084	6,084 Funraising
Ln 19 - Conferences, conventions, meetings	0	3,567	3,567 Program Service

	0	1,521	1,521 Management & General
Ln 24a - Other (Postage/Mailings)	0	997	997 Fundraising
	435,555	399,653	(35,902) Program Service
	0	26,391	26,391 Management & General
	0	22,423	22,423 Fundraising
Ln 24b - Other (Printing/Copying)	114,581	5,220	(109,361) Program Service
	0	40,897	40,897 Management & General
	0	2,427	2,427 Fundraising
Ln 24c - Other (Telephone/Telethon)	48,544	29,726	(18,818) Program Service
	0	3,095	3,095 Management & General
	0	1,727	1,727 Fundraising
Ln 24d - Other (Payroll Fees)	33,548	0	(33,548) Program Service
	0	9,305	9,305 Management & General
	0	0	0 Fundraising
Ln 24e - Other (List Rental)	5,474	5,473	(1) Program Service
	0	0	0 Management & General
	0	0	0 Fundraising
Ln 24f - Other (All other)	2,099	0	(2,099) Program Service
	525	5,272	4,747 Management & General
	0	0	0 Fundraising
Ln 25 - Total functional expenses	774,094	649,848	(124,246) Program Service
	24,151	196,907	172,756 Management & General
	0	33,666	33,666 Fundraising

**Pg 11 Changes**

Ln 1B - Cash	65,178	40,117	(25,061)
Ln 16B - Total Assets	71,129	46,068	(25,061)
Ln 17B - Accounts payable	126,949	183,474	56,525
Ln 26B - Total liabilities	129,949	183,474	53,525
Ln 27B - Unrestricted net assets	(85,820)	(137,406)	(51,586)
Ln 28B - Temporarily restricted net assets	30,000	0	(30,000)
Ln 33B - Total net assets	(55,820)	(137,406)	(81,586)
Ln 34B - Total liabilities & net assets	71,129	46,068	(25,061)

**Pg 11 Changes**

Ln 2a - Financial statements compiled or reviewed	YES	NO	-
Ln 2b - Financial statements audited	NO	YES	-
Ln 2c - Committee that oversees audit	NO	YES	-