Form **991**

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 private foundations)

OMB No. 1545-0047

▶ Do not enter social security numbers on this form as it may be made public.

Department of the Ireasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2020 calendar year, or tax year beginning JUL 1, 2020 and ending JUN 30, 2021

Open to Public Inspection

B	Check if	C Name of organization		D Employer identifi	cation number				
_	Addre								
F]chang □Name	e AMERICAN ATHEISTS, INC.		74-2466507	7				
늗	chang □Initial	e Doing business as	.						
F	return _Final	Number and street (or P.O. box if mail is not delivered to street address)	Room/suit						
	return. termin	-		908-276-					
_	ated Amen	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,143,698.				
늗	return □Applic	CRANFORD, NO 07010		H(a) Is this a group return for subordinates? Yes X No					
L	tion pendir	F Name and address of principal officer: NICK FISH		for subordinates					
_			50	H(b) Are all subordinates in					
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) te: ► WWW • ATHEISTS • ORG	or 52	⊣ ′	list. See instructions				
			1 1/22	H(c) Group exemption 1 9 9 7 .					
K	orm of	organization: X Corporation Trust Association Other ► Summary	L Yea	r of formation: 190/	M State of legal domicile: NJ				
F			TCAN	λπυστοπό το	λ				
Se	1	Briefly describe the organization's mission or most significant activities: AMER NONPOLITICAL EDUCATIONAL ORGANIZATION DE	DICAN	ED WO WAE CO	MDI.ETE AND				
Jan									
Governance		Check this box if the organization discontinued its operations or dispo		1	l 15				
ģ				3	15				
<u>«</u> ۆ		Number of independent voting members of the governing body (Part VI, line 1b)			18				
ţį		Total number of individuals employed in calendar year 2020 (Part V, line 2a)			75				
Activities &		Total number of volunteers (estimate if necessary)			0.				
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			0.				
	B	Net unrelated business taxable income from Form 990-T, Part I, line 11		Prior Year	Current Year				
	8	Contributions and grants (Part VIII line 1h)		1,556,213.	1,459,706.				
ηne	1	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)		0.	0.				
Revenue	1	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		62,723.	213,308.				
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		27,261.	34,298.				
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,646,197.	1,707,312.				
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
10	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		824,610.	753,496.				
se	162			0.	0.				
Expenses	h	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 136, 1	32.	• •					
Ж	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		460,782.	347,778.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,285,392.					
		Revenue less expenses. Subtract line 18 from line 12		360,805.	606,038.				
or	1			Beginning of Current Year	End of Year				
ets	20	Total assets (Part X, line 16)		1,868,978.	2,597,816.				
Ass J Ba	21	Total liabilities (Part X, line 26)		193,432.	202,021.				
Net Assets or Fund Balances	22	Net assets or fund balances. Subtract line 21 from line 20		1,675,546.	2,395,795.				
Pá	art II	Signature Block							
Und	ler pena	lities of perjury. I declare f at I have examined this return, including accompanying schedule	s and state	ments, and to the best of m	y knowledge and belief, it is				
true	, correc	et, and complete. Declaration of preparer (other than officer) is based on all information of w	hich prepar	er has any knowledge.					
		Nill the		5/16/202	22				
Sig	n	Signature of officer		Date					
Her		NICK FISH, PRESIDENT							
		Type or print name and title							
		Print/Type preparer's name Preparer's signature		Date Check	PTIN				
Pai	d	EDWARD K. BALTAZAR, CPA		5-16-2022 if self-employ	P00988228				
Pre	parer	Firm's name DORFMAN ABRAMS MUSIC, LLC		Firm's EIN	**-***5803				
Use	Only	Firm's address 250 PEHLE AVE., SUITE 702							
		SADDLE BROOK, NJ 07663		Phone no. 20	1-403-9750				
Ma	v the II	RS discuss this return with the preparer shown above? See instructions			X Yes No				

Pa	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	THE ORGANIZATION WORKS FOR THE CIVIL LIBERTIES OF ATHEISTS AND THE
	TOTAL, ABSOLUTE SEPARATION OF GOVERNMENT AND RELIGION.
	•
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$747,398 • including grants of \$) (Revenue \$) (Revenue \$
	THE PROMOTION AND EDUCATION WITH RESPECT TO ISSUES REGARDING ATHEISM
	AND THE SEPARATION OF CHURCH AND STATE THROUGH CONVENTIONS,
	NEWSLETTERS, TELEVISION, WEBSITES AND OTHER MEDIA FORUMS. THE
	ORGANIZATION HAS OVER 4,500 MEMBERS IN ALL 50 STATES OF THE USA.
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
4d	,
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 747,398.
	Form 990 (2020)

Form 990 (2020) AMERICAN ATHEISTS, INC. 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			. v
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		X
	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		1
8		8	х	
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		
5	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		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
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, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	х	
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		Х
С	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		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-	Х	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	21	
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			l
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			_ v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10		x
19	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		 ^``
13	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<u> </u>	Х

Form 990 (2020) AMERICAN ATHEISTS,

Part IV Checklist of Required Schedules (continued)

			V	N
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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
D	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		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			37
	entity (including an employee thereof) or family member of any of these persons? 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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
_	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? 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	20		X
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	- 31		
-	Schedule N, Part II	32		Х
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		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			۱,,
0.5	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		
Ь	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		Х
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 11b and 19?		х	
Pai	Note: All Form 990 filers are required to complete Schedule 0 t V Statements Regarding Other IRS Filings and Tax Compliance	38	Δ.	
. ui	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		

Form 990 (2020) AMERICAN ATHEISTS, INC. Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No		
2 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 return	2a	18					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		2 b	Х			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		X		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	rity over, a					
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	int)?	4a		X		
b	If "Yes," enter the name of the foreign country							
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A		` '	_		v		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b				
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c				
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to any contributions that were not tax deductible as charitable contributions?			6a		х		
h	If "Yes," did the organization include with every solicitation an express statement that such contribut			0a				
b	were not tax deductible?		_	6b				
7	Organizations that may receive deductible contributions under section 170(c).			OD				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices	provided to the payor?	7a		Х		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b				
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was							
	to file Form 8282?			7c		X		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontra	ct?	7e		X		
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?							
h								
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
	sponsoring organization have excess business holdings at any time during the year?							
9	Sponsoring organizations maintaining donor advised funds.							
а				9a				
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b				
10	Section 501(c)(7) organizations. Enter:	100	ı					
	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a 10b						
11	Section 501(c)(12) organizations. Enter:	LIUD	L					
		11a						
	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)	11b						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?			13a				
	Note: See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans	13b						
	Enter the amount of reserves on hand	13c				77		
				14a		X		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune			4-		Х		
	excess parachute payment(s) during the year?			15		Δ		
16	If "Yes," see instructions and file Form 4720, Schedule N.	ıt ina-	umo?	16		X		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment if "Ves." complete Form 4720. Schedule O	it ii iCC	MINE!	10		-22		
	If "Yes," complete Form 4720, Schedule O.							

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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI					LX.					
Sec	tion A. Governing Body and Management										
		1 1	4.	-	Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	15	<u></u>							
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		4.	_							
b	Enter the number of voting members included on line 1a, above, who are independent	1b	15	2							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh										
	officer, director, trustee, or key employee?			2		X					
3	Did the organization delegate control over management duties customarily performed by or under the										
	of officers, directors, trustees, or key employees to a management company or other person? \dots			3		X					
4	Did the organization make any significant changes to its governing documents since the prior Form			4		Х					
5	Did the organization become aware during the year of a significant diversion of the organization's as			5 6	Х	Х					
6	•										
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a					٦,					
	more members of the governing body?			7a		Х					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		*			٦,					
	persons other than the governing body?			7b		Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				37						
а	The governing body?			8a	Х	37					
b	Each committee with authority to act on behalf of the governing body?			8b		Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real					\ _{3,7}					
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		Х					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	Revenue	Code.)			·					
40				40	Yes	No X					
	Did the organization have local chapters, branches, or affiliates?			10a							
D	If "Yes," did the organization have written policies and procedures governing the activities of such organization have written policies and procedures governing the activities of such organization and procedure gover			406							
44-	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	Х						
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ay before	e filing the form?	11a	22						
b 100	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			12a	Х						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12b	X						
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If ")			120							
С	in Schedule O how this was done			12c	х						
13	Did the organization have a written whistleblower policy?			13	X						
14	Did the organization have a written document retention and destruction policy?			14		Х					
15	Did the process for determining compensation of the following persons include a review and approv										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•	ioporidorit								
а	The organization's CEO, Executive Director, or top management official			15a	Х						
	Other officers or key employees of the organization			15b	Х						
	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 arrange	ment wi	th a								
	taxable entity during the year?			16a		Х					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluation										
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	•									
	exempt status with respect to such arrangements?			16b							
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed ►NJ, MD, DC, NH, C	OK, ME	ND,CO,H	, MN	,WI	,MS					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	and 990-	T (Section 501(c)(3)s only	/) avail	able					
	for public inspection. Indicate how you made these available. Check all that apply.										
	Own website Another's website X Upon request Other (explain	n on Sch	edule O)								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, c	onflict o	f interest policy, a	nd fina	ncial						
	statements available to the public during the tax year.										
20	State the name, address, and telephone number of the person who possesses the organization's bo	ooks and	l records ▶								
	NICK FISH - 908-276-7300										
	225 CRISTIANI ST. CRANFORD. NJ 07016										

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

Check if Schedule O contains a response or note to any line in this Part VII

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. 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, 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.

See instructions for the order in which to list the persons above.

(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average		not cl		more	than		Reportable	Reportable	Estimated amount of
	hours per week					is bot or/trus		compensation from	compensation from related	other
	(list any	ector						the	organizations	compensation
	hours for related	Individual trustee or director	99:			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	trustee	Institutional trustee		yee	Highest compensated employee		(44-2/1099-141130)		and related
	below	idual	tutions	er	Key employee	est co loyee	Jer.			organizations
	line)	Indiv	Insti	Officer	Key	High emp	Former			
(1) MATT DILLANHUNTY	2.00	۱							•	
DIRECTOR	0.00	Х						0.	0.	0 .
(2) STEVEN LOWE	2.00	١,,							0	_
DIRECTOR	2 00	Х						0.	0.	0 .
(3) ARON RA	2.00	X						0.	0.	0.
DIRECTOR (4) AMANDA KNIEF	2.00	^						0.	0.	0 .
DIRECTOR	2.00	X						0.	0.	0.
(5) KATHLEEN JOHNSON	2.00	122						0.	0.	0 .
DIRECTOR	2.00	x						0.	0.	0.
(6) SETH ANDREWS	2.00	 								
DIRECTOR		X						0.	0.	0.
(7) MADISON PAIGE	2.00									
DIRECTOR		Х						0.	0.	0 .
(8) MANDISA THOMAS	2.00									
DIRECTOR		Х						0.	0.	0 .
(9) FRANK ZINDLER	2.00									
DIRECTOR		Х						0.	0.	0
(10) MARSHA BOTZER	2.00	١							•	
DIRECTOR	2 00	Х						0.	0.	0 .
(11) DEBBY WILLIAMS	2.00	ļ ,,							0	
DIRECTOR	2.00	Х						0.	0.	0 .
(12) ANDREW TORREZ DIRECTOR	2.00	x						0.	0.	0 .
(13) NEAL CARY	2.00	^						0.	0.	0 .
CHAIRPERSON	2.00	Х		Х				0.	0.	0.
(14) WAYNE AIKEN	2.00	123							•	
SECRETARY		x		х				0.	0.	0.
(15) JEN SCOTT	2.00	 								
TREASURER		х		х				0.	0.	0.
(16) NICK FISH	40.00									
PRESIDENT		1		Х				109,948.	0.	10,707
(17) ALISON GILL	40.00									
VICE PRESIDENT, LEGAL AND		L		X				106,541.	0.	10,966.

Part VII Section A. Officers, Directors, Tru	stees, Key Em	ploy	/ees	, an	d Hi	ighe	st (Compensated Employe	es (continued)				
(A)	(B)	(C)						(D)	(E)			(F)	
Name and title	Average	Position (do not check more than one				ገ e than	one	Reportable	Reportable			imate	
	hours per week					is bot or/trus			compensation from relate			ount c other	ıf
	(list any	.to:	tor.					from the	organization			ensat	ion
	hours for	r direc				ted			(W-2/1099-MI			m the	
	related	stee o	trustee			bensa		(W-2/1099-MISC)				nizatio	
	organizations below	ual tru	ional t		ployee	t com	١.					relate nizatio	
	line)	Individual trustee or director	Institutional trustee	Office r	Key employee	Highest compensated employee	o me				Organ	iizatio	113
(18) DEBBIE GODDARD	40.00	Ι-	 -		×	1	 						
VICE PRESIDENT, PROGRAMS				Х				74,294.		0.	2	,86	51.
							┡						
		-											
		-					┢						
		┨											
							H						
		1											
		-				-	-						
		-											
		-					┢						
		1											
1b Subtotal							▶	290,783.		0.	31	.,53	34.
c Total from continuation sheets to Part \								0.		0.			0.
d Total (add lines 1b and 1c)								290,783.		0.	31	.,53	34.
2 Total number of individuals (including but	not limited to th	nose	liste	ed a	bov	e) w	ho r	eceived more than \$100	0,000 of reportat	ole			_
compensation from the organization											1	Yes	No
2 Did the expenientian list on former office	r director truct	1			lovio		r bir	shoot componented own	alayaa an			res	NO
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for			•		•		•		•		3		Х
4 For any individual listed on line 1a, is the s													
and related organizations greater than \$1	-		-					•	g		4		Х
5 Did any person listed on line 1a receive or	accrue compe	nsat	ion 1	from	any	y uni	relat	ted organization or indiv	idual for services	3			
rendered to the organization? If "Yes," con	mplete Schedu	le J f	for s	uch	pers	son					5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest of										npens	ation fr	om	
the organization. Report compensation fo	r the calendar y	ear (enai	ing v	vitn	or w	/itnii	n the organization's tax	year.		(C	\	
Name and busines	s address	NO	INC	E				Description of s	ervices	c	compen	, sation	J
							_						
							\dashv						
2 Total number of independent contractors	(including but r	not lii	mite	d to	tho	se li	sted	d above) who received n	nore than				
\$100,000 of compensation from the organ	nization >					0							
											Form C	190 (2	U2U/

Form	990) (2	2020) AME	ERICAN A	THEI	STS, IN	rC.		74-246650	⁰⁷ Page 9
Pa	rt V	<u> </u>	Statement of Re	venue						
			Check if Schedule O	contains a resp	onse or	note to any li				
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
nts	1	а	Federated campaigns	1a						
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues		1	14,142.				
ts, (С	Fundraising events	1c						
Giff		d	Related organizations	1d						
ns,			Government grants (contr	· · · ·	1	57,234.				
er S		f	All other contributions, gifts,			00 000				
gi			similar amounts not included			88,330.				
nd		_	Noncash contributions included in				1 450 706			
a C		h	Total. Add lines 1a-1f				1,459,706.			
	_	_			<u> </u>	Business Code				
Program Service Revenue	2				— <u> </u>					
Ser		b			— H					
ın (c d								
gra Re		u _			— 					
Prc		f	All other program service	revenue	— F					
			Total. Add lines 2a-2f							
	3	<u> </u>	Investment income (include							
			other similar amounts)				31,554.			31,554.
	4		Income from investment of							
	5		Royalties)				
				(i) Rea	al	(ii) Personal				
	6	а	Gross rents	6a						
			Less: rental expenses	6b						
			Rental income or (loss)	6c						
			Net rental income or (loss			/::\ Other:				
	7	а	Gross amount from sales of	(i) Securi 7a 618,14		(ii) Other				
		_	assets other than inventory Less: cost or other basis	/a 010,1	40.		-			
<u>o</u>		D	and sales expenses	7ь 436,38	86.					
evenue		_	Gain or (loss)	7c 181,7	54.					
Rev			Net gain or (loss)	<u> </u>		•	181,754.	181,754.		
Other			Gross income from fundraisi				,	,		
₹				of						
			contributions reported on	line 1c). See						
			Part IV, line 18		8a					
			Less: direct expenses							
			Net income or (loss) from)				
	9	а	Gross income from gamin							
			Part IV, line 19							
			Less: direct expenses Net income or (loss) from							
			Gross sales of inventory,		JS	······				
	10	a	and allowances	iess returns	10a	28.137.				
		b	Less: cost of goods sold		10b	0.				
			Net income or (loss) from				28,137.	28,137.		
<u></u>				2		Business Code		,		
e šo	11	а	MISC			900099	6,161.			6,161.
ane		b								
Miscellaneous Revenue		С								
Mis			All other revenue							
		е	Total. Add lines 11a-11d				6,161.			20 040
	12		Total revenue. See instruction	ons			1,707,312.	209,891.	0.	37,715.

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).

3601	Charle if Sahadula Chartains a reason			. , ,	
Da	Check if Schedule O contains a respon	(A)	this Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	242 446	24.2 22.4	5 4 040	00 455
	trustees, and key employees	313,416.	219,391.	54,848.	39,177.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	226 140	225 204	E0 026	42 010
7	Other salaries and wages	336,149.	235,304.	58,826.	42,019.
8	Pension plan accruals and contributions (include				
•	section 401(k) and 403(b) employer contributions)	46,563.	32,594.	8,149.	5,820.
9 10	Other employee benefits	57,368.	40,158.	10,039.	7,171.
10 11	Payroll taxes Fees for services (nonemployees):	37,300.	±0,130•	10,000.	1,114
	Management				
	Legal	13,297.	9,308.	2,327.	1,662.
	Accounting	12,029.	8,420.	2,105.	1,504.
	Lobbying	,	, == 0		
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	37,620.	26,335.	6,583.	4,702.
12	Advertising and promotion	804.	804.		
13	Office expenses				
14	Information technology	52,533.	36,773.	9,193.	6,567.
15	Royalties				
16	Occupancy	61,780.	43,246.	10,812.	7,722.
17	Travel	22,599.	15,819.		6,780.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest Payments to efficience				
21	Payments to affiliates	34,831.	24,382.	6,095.	4,354.
22	Depreciation, depletion, and amortization Insurance	24,691.	24,302.	24,691.	Ŧ,JJŦ•
23 24	Other expenses. Itemize expenses not covered	21,001.		21,001.	
4 +	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	OFFICE SUPPLIES AND MIS	39,811.	27,868.	6,967.	4,976.
b	PRINTING	29,422.	20,595.	5,149.	3,678.
С	DUES AND MEMBERSHIPS	10,867.	6 401	10,867.	
d	MERCHANDISE EXPENSES	6,401.	6,401.	1 000	
	All other expenses	1,093.	747 200	1,093.	126 122
25	Total functional expenses. Add lines 1 through 24e	1,101,274.	747,398.	217,744.	136,132.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Earm 990 (2020)

Form 990 (2020) Part X Balance Sheet

Pai	IL A	Balance Sheet					
		Check if Schedule O contains a response or r	note to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			98,403.	1	218,608.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			828.	4	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sul	ostantial o	contributor, or 35%			
		controlled entity or family member of any of the	nese pers	ons		5	
	6	Loans and other receivables from other disqu	alified pe	rsons (as defined			
		under section 4958(f)(1)), and persons describ		6			
şţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			8,550.	8	8,550.
⋖	9	Prepaid expenses and deferred charges			7,412.	9	17,384.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		1,265,098.			
	b	Less: accumulated depreciation	10b	741,171.	558,758.	10c	523,927.
	11	Investments - publicly traded securities		1,195,027.	11	1,829,347.	
	12	Investments - other securities. See Part IV, lin		12			
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			1 060 080	15	0 505 016
	16	Total assets. Add lines 1 through 15 (must ed			1,868,978.	16	2,597,816.
	17	Accounts payable and accrued expenses			36,198.	17	48,684.
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet				21	
Liabilities	22	Loans and other payables to any current or fo					
Ξ		trustee, key employee, creator or founder, sul					
Lia		controlled entity or family member of any of the				22	
	23	Secured mortgages and notes payable to unr				23	
	24	Unsecured notes and loans payable to unrela		_		24	
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lin					
		•	165 17-24	. Complete Part A	157,234.	25	153,337.
	26	of Schedule D Total liabilities. Add lines 17 through 25			193,432.	26	202,021.
	20	Organizations that follow FASB ASC 958, c			13371321	20	202,021
es		and complete lines 27, 28, 32, and 33.	HECK HE				
anc	27				1,634,181.	27	2,355,798.
Bal	28	Net assets with donor restrictions			41,365.	28	39,997.
pu		Organizations that do not follow FASB ASC			,		, , ,
Ŀ		and complete lines 29 through 33.	, 000, 011				
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fund	ds			29	
set	30	Paid-in or capital surplus, or land, building, or				30	
As	31	Retained earnings, endowment, accumulated				31	
Vet	32	Total net assets or fund balances			1,675,546.	32	2,395,795.
_	33	Total liabilities and net assets/fund balances			1,868,978.	33	2,597,816.

	1990 (2020) 1111111111111111111111111111111111			га	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,70		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,10	1,2	74.
3	Revenue less expenses. Subtract line 2 from line 1	3			38.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,67		
5	Net unrealized gains (losses) on investments	5	11	4,2	11.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2,39	5,7	<u>95.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sci	nedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ired audit			
	or guidite, explain why on Schodule O and describe any stone taken to undergo such guidite		26		I

Form **990** (2020)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number AMERICAN ATHEISTS, INC. 74-2466507 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Part II Support Schedule for Organizations Described in Sections 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 under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
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						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						_
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						_
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3)	
	organization, check this box and stop						<u></u> ▶□
	tion C. Computation of Publ						
14	Public support percentage for 2020 (14	<u>%</u>
15	Public support percentage from 2019	Schedule A, Part	II, line 14			15	<u>%</u>
16a	33 1/3% support test - 2020. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2019. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes	_					*
	and if the organization meets the fact		·	-	•	VI how the organiz	ation
	meets the facts-and-circumstances to	•	•				
b	10% -facts-and-circumstances tes	-					10% or
	more, and if the organization meets the				-		
	organization meets the facts-and-circ			•			
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	and see instruction	s ▶└

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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.)

Se	ction A. Public Support	ciow, picaco comp	noto i uit iii)				
	endar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and	, ,	·	, ,	, ,	, ,	.,
	membership fees received. (Do not						
	include any "unusual grants.")	835,947.	366,019.	623,998.	1,556,213.	1,459,706.	4,841,883.
2	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	56,033.	171,185.	143,280.	25,429.	28,137.	424,064.
3	Gross receipts from activities that						
	are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	891,980.	537,204.	767,278.	1,581,642.	1,487,843.	5,265,947.
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons	5,000.	2,000.				7,000.
k	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						0
	amount on line 13 for the year	5,000.	2,000.				7,000.
	Add lines 7a and 7b Public support. (Subtract line 7c from line 6.)	3,000.	2,000.				5,258,947.
	ction B. Total Support						3,230,347.
	endar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6	891,980.	(b) 2017 537, 204.	(c) 2018 767, 278.	1,581,642.	1,487,843.	5,265,947.
	Gross income from interest,		7 - 7 - 7 - 7	,			7 - 1 - 7 - 1 - 2
	dividends, payments received on securities loans, rents, royalties, and income from similar sources	35,648.	46,702.	64,438.	62,723.	213,308.	422,819.
k	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b	35,648.	46,702.	64,438.	62,723.	213,308.	422,819.
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		·		·	·	
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	17,691.	1,459.	328.	1,832.	6,161.	27,471.
13	Total support. (Add lines 9, 10c, 11, and 12.)	945,319.	585,365.	832,044.	1,646,197.	1,707,312.	5,716,237.
14	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax y	ear as a section 5	601(c)(3) organizati	ion,
_	check this box and stop here						<u></u>
	ction C. Computation of Publ						00 00
	Public support percentage for 2020 (I			column (f))		15	92.00 %
	Public support percentage from 2019					16	94.69 %
	ction D. Computation of Inves						7 40
	Investment income percentage for 20					17	7.40 %
	Investment income percentage from 2	•				18	4.49 %
198	a 33 1/3% support tests - 2020. If the						7 is not ► X
k	more than 33 1/3%, check this box at a 33 1/3% support tests - 2019. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%,	and
00	line 18 is not more than 33 1/3%, che			•		•	
20	Private foundation. If the organizatio	n dia not check a	oox on line 14, 19	a, or 190, check th	is box and see ins	structions	

Page 4

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
1 a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Sche	dule A (Form 990 or 990-EZ) 2020 AMERICAN AIREISIS, INC.	4-2466507	Pa	age 5
Pai	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
800	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
_	Did the grave miner hands, manufactor of the grave miner hands, officers patient in their official connection, as manufactor of		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of o more supported organizations have the power to regularly appoint or elect at least a majority of the organization's of directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization had more than organization had not be also	ficers,		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	the 1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instr	uctions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity.	ty (see instructio	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Support	ing Orga	nizations	5
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust or	n Nov. 20, 1970 (explain in I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	ust complet	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	cion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	nally integra	ted Type III supporting org	anization (see
	instructions)	-		

Schedule A (Form 990 or 990-EZ) 2020

	dule A (Form 990 or 990-EZ) 2020 AMERICAN ATHE	ISTS, INC.			1-2466507 Page 7
Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations _{(continu}	ıed)	
Secti	on D - Distributions		·		Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	he organization is responsive	Э		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2020	าร	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
	Carryover from 2015 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
-	and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				

Schedule A (Form 990 or 990-EZ) 2020

e Excess from 2020

Schedule A	(Form 990 or 990-EZ) 2020 AMERICAN ATHEISTS, INC. Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

AMERICAN ATHEISTS, INC.

Employer identification number

74-2466507

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts.Complete if the			
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.				
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in		sed funds			
	are the organization's property, subject to the organization's	_				
6	Did the organization inform all grantees, donors, and donor a					
	for charitable purposes and not for the benefit of the donor of					
Pai						
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).				
	Preservation of land for public use (for example, recrea		f a historically important land area			
	Protection of natural habitat		f a certified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last			
	day of the tax year.		Held at the End of the Tax Year			
а	Total number of conservation easements		2a			
	Total acreage restricted by conservation easements					
	Number of conservation easements on a certified historic str					
	Number of conservation easements included in (c) acquired					
	listed in the National Register		I			
3	Number of conservation easements modified, transferred, re					
	year▶					
4	Number of states where property subject to conservation ea	sement is located				
5	Does the organization have a written policy regarding the pe					
	violations, and enforcement of the conservation easements i					
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	servation easements during the year			
	>					
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year			
	▶ \$					
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	O(h)(4)(B)(i)			
	and section 170(h)(4)(B)(ii)?		Yes No			
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expens	e statement and			
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial staten	nents that describes the			
	organization's accounting for conservation easements.					
Pai	t III Organizations Maintaining Collections o	of Art, Historical Treasures, or C	Other Similar Assets.			
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.				
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement	and balance sheet works			
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in t	urtherance of public			
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.					
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and	balance sheet works of			
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in fur	herance of public service,			
	provide the following amounts relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1		> \$			
	(ii) Assets included in Form 990, Part X		·			
2	If the organization received or held works of art, historical tre					
	the following amounts required to be reported under FASB A	ASC 958 relating to these items:				
а	Revenue included on Form 990, Part VIII, line 1		> \$			
h	Assets included in Form 990 Part Y		<u> </u>			

Par	t III Organizations Maintaining Co	llections of A	rt, His	torical Tr	easures, e	or Othe	r Similar A	ssets(cont	inued)
3	Using the organization's acquisition, accession	n, and other record	ls, chec	k any of the	following tha	at make si	gnificant use o	of its	
	collection items (check all that apply):								
а	X Public exhibition	d	і Ш	Loan or exc	hange progra	am			
b	X Scholarly research	е		Other					
С	Preservation for future generations								
4	Provide a description of the organization's coll	ections and explai	n how th	ney further t	he organizati	ion's exem	npt purpose in	Part XIII.	
5	During the year, did the organization solicit or	receive donations	of art, hi	istorical trea	sures, or oth	er similar i	assets		
	to be sold to raise funds rather than to be main							Yes	X No
Par	t IV Escrow and Custodial Arrang	-	ete if the	e organizatio	n answered	"Yes" on F	Form 990, Par	t IV, line 9, c	or
	reported an amount on Form 990, Part	X, line 21.							
1a	Is the organization an agent, trustee, custodian								
	on Form 990, Part X?							຺∟∐ Yes	└── No
b	If "Yes," explain the arrangement in Part XIII ar	nd complete the fo	llowing	table:					
								Amour	<u>nt</u>
	Beginning balance								
	Additions during the year								
	Distributions during the year								
	Ending balance								
	Did the organization include an amount on For						y?	· L Yes	├ No
_	If "Yes," explain the arrangement in Part XIII. C								<u>. L</u>
Par	t V Endowment Funds. Complete if t								
		(a) Current year	(b) ⊦	Prior year	(c) Two yea	rs dack (1) Three years b	Dack (e) Fou	ir years back
	Beginning of year balance								
	Contributions								
	Net investment earnings, gains, and losses								
	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
	Administrative expenses								
g	End of year balance			. ,					
2	Provide the estimated percentage of the curre	•	-	g, column (a	a)) held as:				
	Board designated or quasi-endowment		_%						
	Permanent endowment	%							
С	Term endowment								
2-	The percentages on lines 2a, 2b, and 2c shoul	•	-4: 41						
Sa	Are there endowment funds not in the possess	sion of the organiz	ation the	at are rielu a	ina aaministe	erea for the	e organization	l	Yes No
	by:							20(1)	Yes No
	(i) Unrelated organizations							3a(i)	
h	(ii) Related organizations								
<i>1</i>	Describe in Part XIII the intended uses of the co								
Par	t VI Land, Buildings, and Equipme		WITIETT	iurius.					
	Complete if the organization answered) Part I\	/ line 11a 9	See Form 990) Part X I	ne 10		
-	Description of property	(a) Cost or o		<u> </u>	or other		cumulated	(d) Boo	ok value
	besomption of property	basis (investr		, , ,	(other)		reciation	(4)	ZIT VAIGE
12	Land	'			9,871.			23	9,871.
	Buildings				5,280.	7	16,755.		8,525.
	Leasehold improvements				-,	,	, ,	 	-,
	Equipment			3	9,947.		24,416.	1	5,531.
	Other				- , •		_, ,	-	-,
	. Add lines 1a through 1e. (Column (d) must equ		X. colur	nn (B). line 1	10c.)	<u> </u>		52	3,927.
. 5.01			.,	. , _ , ,	/		·····		

Del Miller de Company			ı age s
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" on F			-f.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	or-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C) (D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" on F	Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" on F		e 11d. See Form 990, Part X, line 15.	(1) D
(a) Des	cription		(b) Book value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15	1		
Part X Other Liabilities.	·/		
Complete if the organization answered "Yes" on F	Form 990 Part IV line	a 11e or 11f See Form 990 Part X line 25	
1. (a) Description of liability	om ood, rarery, mre	2 110 01 111. 000 1 0111 000,1 u.t.X, iii 20.	(b) Book value
(1) Federal income taxes			. ,
(2) REFUNDABLE ADVANCE - PAYCHE	CK		
(3) PROTECTION PROGRAM			153,337.
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
		1	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25	.)		153,337.

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

Schedule D (Form 990) 2020

30116	Edule D (FOIII 990) 2020 INTELLIGITATION TO THE STATE OF				raye ¬
Pai	t XI Reconciliation of Revenue per Audited Financial Sta	tements With	n Revenue per R	eturn	
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	1,821,523.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	114,211.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	114,211.
3	Subtract line 2e from line 1			3	1,707,312.
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 XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,707,312.
Pa	rt XII Reconciliation of Expenses per Audited Financial St	atements Wit	h Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.			
1	Total expenses and losses per audited financial statements			1	1,101,274.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses				
d					
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	1,101,274.
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 XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18			5	1,101,274.
Pa	rt XIII Supplemental Information.				
Prov	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	1; Part IV, lines 1b	and 2b; Part V, line 4	1; Part	X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide ar	ny additional infor	mation.		
PAI	RT 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 COLLECTION IS MAINTAINED UNDER THE CARE OF THE COLLECTIONS DEPARTMENT AND IS HELD FOR RESEARCH AND EDUCATION RATHER THAN FOR FINANCIAL GAINS. THE ORGANIZATION DOES NOT INCLUDE EITHER THE COST OR THE VALUE OF ITS COLLECTION IN THE ACCOMPANYING STATEMENT OF FINANCIAL POSITION, NOR DOES IT RECOGNIZE GIFTS OF COLLECTION ITEMS AS REVENUE IN THE ACCOMPANY STATEMENT OF ACTIVITIES. ITEMS PURCHASED FOR THE COLLECTION

Part XIII Supplemental Information (continued)
ARE REPORTED AS EXPENSES IN THE ACCOMPANYING STATEMENT OF ACTIVITIES.
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.
PART X, LINE 2:
THE ORGANIZATION IS A TAX-EXEMPT ORGANIZATION AS DEFINED BY SECTION
501(C)(3) OF THE INTERNAL REVENUE CODE, THOUGH IT IS SUBJECT TO TAX ON
INCOME UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE
EXCLUDED BY THE CODE. THE ORGANIZATION HAS PROCESSES PRESENTLY IN PLACE TO
ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS; TO IDENTIFY AND REPORT
UNRELATED INCOME; TO DETERMINE ITS FILING AND TAX OBLIGATIONS IN
JURISDICTIONS FOR WHICH IT HAS NEXUS; AND TO IDENTIFY AND EVALUATE OTHER
MATTERS THAT MAY BE CONSIDERED TAX POSITIONS. THE ORGANIZATION HAS
DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE
RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ ► Go to www.irs.gov/Form990 for the latest information. **Open to Public**

OMB No. 1545-0047

Inspection

Name of the organization

AMERICAN ATHEISTS, INC.

Employer identification number 74-2466507

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: ABSOLUTE SEPARATION OF STATE AND CHURCH, ACCEPTING THE EXPLANATION OF THOMAS JEFFERSON THAT THE FIRST AMENDMENT OF THE CONSTITUTION OF THE UNITED STATES WAS MEANT TO CREATE A "WALL OF SEPARATION" BETWEEN STATE AND CHURCH. THE ORGANIZATION IS DEDICATED TO WORKING FOR THE CIVIL RIGHTS OF ATHEISTS, PROMOTING SEPARATION OF CHURCH AND STATE, AND PROVIDING INFORMATION AND EDUCATION ABOUT ATHEISM.

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 11B:

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.

Name of the organization AMERICAN ATHEISTS, INC.	Employer identification number 74 - 24 66 50 7
FORM 990, PART VI, SECTION B, LINE 15:	, , , , , , , , , , , , , , , , , , , ,
THE COMPENSATION OF THE PRESIDENT IS DETERMINED BY THE BO	ARD 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 CON	TRACT EACH YEAR.
THE COMPENSATION OF THE EMPLOYEES IS DETERMINED BY THE PR	ESIDENT WITH
APPROVAL FROM THE BOARD OF DIRECTORS.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
NJ,MD,DC,NH,OK,ME,ND,CO,HI,MN,WI,MS,MA,SC,CT,AR,CA,KY,OR,	PA, VA, MI, KS, TN, OH
GA	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTER	EST POLICY AND
FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST.	
FORM 990, PART XII, LINE 2C	
THE BOARD REVIEWS THE 990 AND FINANCIAL STATEMENTS PRIOR	TO FILING.