Return of Organization Exempt from Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Open to Public Inspection

	\overline{A}	For the	2004 calend	ar year,	or tax year beginning 4/0	1 , 2004,	and en	ding 3/3	1		2005	
	В	Check if a	pplicable		<u> </u>	1				oyer ider	ntification Number	
		Addre	ess change	Please use IRS label	AMERICAN CIVIL LIE	ERTIES UNION			62	-0988	8329	
		-	e change	or print or type.	FOUNDATION, INC.				E Telep			
		\vdash	l return	See specific	P.O. BOX 120160	^			61	5-320	0-7142	
		Final	return	instruc- tions.	NASHVILLE, TN 3721	.2				unting od:		Accrual
		\vdash	nded return							Other (sp		<u> </u>
		\mathbf{H}	cation pending	• Section	on 501(c)(3) organizations an	d 4947(aV1) nonevemnt	н	and I are not apple				
			outer positions	charit	iable trusts must attach a coi	npleted Schedule A		(a) Is this a grou				X No
	_			•	1 990 or 990-EZ).			(b) If 'Yes,' ente	-			
	G	Web si	te: ► ACLU-	-TN.OR	<u></u>			(C) Are all affilia			Yes	□ No
	J		zation type	_	ଟ			(If 'No,' atta			tions)	
	-	<u> </u>	only one)		X 501(c) 3 ◀ (insert r		527 H	(d) is this a sep	arate return	filed by	an	
	K				nization's gross receipts are r		- 1	organization				X No
		receive	d a Form 996	0 Packag	eed not file a return with the lie in the mail, it should file a	return without financial d	ata.	Group Ex	emption	Numb	er 🕨	
		Some s	states require	e a comp	lete return.		M	l Check ▶	ıf the	organiza	ation is not requir	ed
	L	Gross re	eceipts: Add Ii	nes 6b, 8	b, 9b, and 10b to line 12 ▶	161,330.		to attach Sc), 990-EZ, or 990-I	
					ses, and Changes in No		alanc	es (See Instru	uctions)			
					ants, and similar amounts rec							
			rect public s	-			1 a	13	,876.			
			ndirect public				1 b		,389.			
		c G	overnment c	ontributio	ons (grants)		1c		,			
2002		d T	otal (add lines a through 1c) (cas	sh \$	95,265. noncash	\$)			1 d	95	,265.
7					ue including government fees					2		
27					assessments	, , , ,				3		
			•		temporary cash investments				l	4		
8					from securities					5	4	,881.
G	ľ	6a G	ressente.		····		6a			* ** **		
	ı	بالطب	ECEN	Spenses,			6 b					
퍼	ł	l c N	et rental inco	ome or	(subtract line 6b from lin	e 6a)				6c		
BCANNED	R	<u>∞</u> t d	11.6 in 3 e .0 m	2005cd	re (describe ►	•)	7	7	,527.
3	Ę	' 1			s of assets other	(A) Securities		(B) Othe	er			
Ø	E	~ ~	PR HWETKITY	1.17.2	Print		8a			*		
₩	μE	يره ر	ess: cost or o	other bas	a us and sales expenses		8b					
			aın or (loss) (att				8c			(*		
		d N	et gain or (lo	ss) (com	ibine line 8c, columns (A) and	d (B))				8d		
		9 S	pecial events	s and act	ıvıtıes (attach schedule). If ar	y amount is from gamin	g, chec	k here 🕨	· 🗌 🔝			
		a G	iross revenue	e (not inc	luding \$ 4, 3	30. of contributions						
		r€	eported on lir	ne 1a)			9a	47	,175.			
		b L	ess: direct ex	kpenses (other than fundraising expens	ses	9b	15	,436.			
		c N	et income or	(loss) fr	om special events (subtract li	ne 9b from line 9a)		Statem	ent1	9с	31	<u>,739.</u>
		10a G	iross sales of	f inventoi	y, less returns and allowance	s.	10 a					
		b L	ess: cost of o	goods so	ld		10 Ь					
		C Gi	ross profit or (lo	ss) from sa	lles of inventory (attach schedule) (su	btract line 10b from line 10a) .				10 c		
		11 0	ther revenue	(from Page	art VII, line 103)	•••				11	6	,482.
		12 T	otal revenue	(add line	es 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c	, 10c, and 11)		<u></u>		12	145	<u>,894.</u>
	Ε	13 P	rogram servi	ces (fron	n line 44, column (B))					13	99	<u>,291.</u>
	X	14 M	lanagement a	and gene	ral (from line 44, column (C))					14	30	<u>,217.</u>
	E	15 F	undraising (f	rom line	44, column (D))					15	30	<u>,546.</u>
	EXPERSES	1	-		(attach schedule)	••••				16		
	Ś				nes 16 and 44, column (A))					17		,054.
	A	1			he year (subtract line 17 fron	· ·				18	-14	,160.
	A S S E T	1			ances at beginning of year (fr					19	374	,851.
	ŤĘ		-		ssets or fund balances (attac	•				20		
	Š	21 N	et assets or	fund bala	ances at end of year (combine	e lines 18, 19, and 20)				21	360	,691.

Form 990 (2004)

Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

D	o not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising		
22	Grants and allocations (att sch)	3-10-10-10-10-10-10-10-10-10-10-10-10-10-						
	(cash \$							
	non-cash \$)	22						
23	Specific assistance to individuals (att sch)	23						
24	Benefits paid to or for members (att sch)	24 25	39,936.	23,962.	7,987.	7,987.		
25 26	Compensation of officers, directors, etc Other salaries and wages	26	44,183.	26,510.	8,837.	8,836.		
27	Pension plan contributions .	27	7,618.	4,571.	1,524.	1,523.		
28	Other employee benefits	28	13,588.	8,153.	2,717.	2,718.		
29	Payroll taxes	29	6,635.	3,981.	1,327.	1,327.		
30	Professional fundraising fees	30						
31	Accounting fees	31	1,700.	1,020.	340.	340.		
32	Legal fees	32						
33	Supplies	33	4,281.	2,569.	856.	856.		
34	Telephone	34	4,206.	2,524.	841.	841.		
35	Postage and shipping	35	1,037.	622.	208.	207.		
36	Occupancy	36	15,714.	9,428.	3,143.	3,143.		
37	Equipment rental and maintenance	37	-					
38	Printing and publications	38	2,907.	1,744.	582.	581.		
39	Travel	39	2,287.	1,372.	458.	457.		
40	Conferences, conventions, and meetings.	40						
41	Interest	41						
42	Depreciation, depletion, etc (attach schedule)	42	776.	466.	155.	155.		
43	Other expenses not covered above (itemize):				,			
ē	See Statement 2	43a	15,186.	12,369.	1,242.	1,575.		
)	43b						
		43c						
		43 d						
•	·	43e						
44	Total functional expenses (add lines 22 - 43). Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	160,054.	99,291.	30,217.	30,546.		
Join	t Costs. Check . If you are following	SOP 9		,	<u> </u>			
Are	any joint costs from a combined education	nal cam	paign and fundraising s	solicitation reported in (B) Program services?	. ▶ Yes X No		
	es,' enter (i) the aggregate amount of thes	e joint	costs \$; (ii) the a	imount allocated to Prog ; and (iv) th	ram services		
\$_	; (iii) the amount al	located	I to Management and go	eneral \$; and (iv) th	e amount allocated		
to Fu	ındraısıng \$.							
	Statement of Program Ser					D		
Wha	t is the organization's primary exempt pur	pose?	See Stateme	nt 3	State the number of	Program Service Expenses (Required for 501(c)(3) and		
clier	rganizations must describe their exempt parts served, publications issued, etc. Discusons and 4947(a)(1) nonexempt charitable	ss achi	evements that are not n	neasurable. (Section 50	11(c)(3) & (4) organ-	(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others)		
ızatı	ons and 494/(a)(1) nonexempt charitable	trusts	must also enter the amo	ount of grants & allocati	ions to others.)	optional for others)		
•	LEGAL ASSISTANCE AND SUPP	OKT_	SEKATCES					
			-					
				allocations \$		48,608.		
	PROVIDE EDUCATIONAL INFOR	МЪТТ			DTVTDIIAT.	40,000.		
	CIVIL RIGHTS	7.77.7	7.1 T/ TITT TODE	2 100000110				
	CIVIL KIGHIS							
			(Grants and	d allocations \$		50,683.		
			(Granto Gri	2 411004110110 4		<u> </u>		
,				- 				
			(Grants and	d allocations \$				
	d							
			(Grants and	d allocations \$)			
	Other program services			d allocations \$)			
	Total of Program Service Expenses (sh	ould e	qual line 44, column (B)	, Program services)	,, , ▶	99,29 <u>1</u> .		

Parely Balance Sheets (See Instructions)

Note	: W	here required, attached schedules and amounts within the description plumn should be for end-of-year amounts only.	(A) Beginning of year		(B) End of year
	45	Cash – non-interest-bearing	75,764.	45	60,841.
	46	Savings and temporary cash investments	232,069.	46	128,521.
	47	a Accounts receivable			
		b Less: allowance for doubtful accounts 47b	13,200.	47 c	6,729.
	48	a Pledges receivable			
		b Less: allowance for doubtful accounts 48b	-	48c	
	49	Grants receivable		49	
ASSETS	50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
Ē	51	a Other notes & loans receivable (attach sch)		35.24	
s		b Less: allowance for doubtful accounts 51 b		51 c	
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges	6,218.	53	6,200.
	54		49,155.	54	161,642.
	55	a Investments - land, buildings, & equipment: basis 55a			
		b Less: accumulated depreciation (attach schedule)		55 c	
	56	Investments – other (attach schedule)		56	
	57	a Land, buildings, and equipment: basis 57a 15,894.			
		b Less: accumulated depreciation (attach schedule) Statement 4 57b 13,293.	738.	57 c	2,601.
- 1	58	- · · · · · · · · · · · · · · · · · · ·		58	1,783.
	59		377,144.	59	368,317.
	60	Accounts payable and accrued expenses	2,172.	60	7,626.
ĻΪ	61	Grants payable		61	
À	62	Deferred revenue		62	
A B L I T	63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
Ţ	64	a Tax-exempt bond liabilities (attach schedule)		64 a	
- 1		b Mortgages and other notes payable (attach schedule)		64 b	,
S	65	Other liabilities (describe)	121.	65	
\perp	66	Total liabilities (add lines 60 through 65)	2,293.	66	7,626.
	Orga	nizations that follow SFAS 117, check here ► X and complete lines 67			
Ĕ		through 69 and lines 73 and 74.			
- 1	67		324,851.	$\overline{}$	332,220.
S-ITTONA P	68		50,000.	68	28,471.
	69			69	
P (Orga	nizations that do not follow SFAS 117, check here > and complete lines			
		70 through 74.			
DZC	70			70	
	71			71	
Ê	72			72	
野々しく太い田 の		Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)	374,851.	73	360,691.
	74	Total liabilities and net assets/fund balances (add lines 66 and 73)	377,144.	74	368,317.

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

BAA

gan	Financial Statements wit per Return (See Instruction	Fart IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return				
a	Total revenue, gains, and other support per audited financial statements	a 145,894.	а	Total expenses and financial statements	losses per audited	160,054
	Amounts included on line a but not on line 12, Form 990:	2	b	Amounts included or on line 17, Form 990		
• •	Net unrealized gains on investments . \$		(1)	Donated serv- ices and use of facilities \$		
` .	Donated services and use of facilities \$		(2)	Prior year adjust- ments reported on line 20, Form 990 \$		
	Recoveries of prior year grants \$		(3)	Losses reported on line 20, Form 990 \$		
(4)	Other (specify):		(4)	Other (specify):		
	\$			\$	<u>*</u>	
	Add amounts on lines (1) through (4) Line a minus line b	t 145,894.	С	Add amounts on lines (1) Line a minus line b .		
	Amounts included on line 12, Form 990 but not on line a:		d	Amounts included or Form 990 but not on	n line 17, line a:	
	Investment expenses not included on line 6b, Form 990 \$		(1)	Investment expenses not included on line 6b, Form 990 \$		
	Other (specify):		(2)	Other (specify):		
				\$	3 · · · · · · · · · · · · · · · · · · ·	
	Add amounts on lines (1) and (2).	d		Add amounts on line	es (1) and (2) 🟲 🐧	
	Total revenue per line 12, Form 990 (line c plus line d)	e 145,894.	е	Total expenses per 990 (line c plus line	d) ► €	
art	List of Officers, Directors,			yees (List each one	e even if not compens	ated; see instructions.
	(A) Name and address	(B) Title and average ho per week devoted to position	ours	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	(E) Expense account and other allowances
ee	Statement 6					
				39,936.	0.	. 0
		-				
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		_				
		-				
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			+			
	· 	_				
		1	- 1		!	

Form 990 (2004) AMERICAN CIVIL LIBERTIES UNION 6	2-0988329	Page 5
Part VI Other Information (See instructions)		Yes No
76 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	. _	
	76	X
77 Were any changes made in the organizing or governing documents but not reported to the IRS?	77	X
If 'Yes,' attach a conformed copy of the changes		v
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by the		X X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	<mark>78b</mark>	N/A
79 Was there a liquidation, dissolution, termination, or substantial contraction during the	79	v
year? If 'Yes,' attach a statement		^
80 a Is the organization related (other than by association with a statewide or nationwide organization) through c membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization?	ommon 80 a	Y
b If 'Yes,' enter the name of the organization ► N/A	OU a	A A
	nonexempt.	
81 a Enter direct and indirect political expenditures. See line 81 instructions 81 a	0.	
b Did the organization file Form 1120-POL for this year?.	81 ь	X
•		
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge of substantially less than fair rental value?	orat . 82a	X
•		5 2
b If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	N/A	
83a Did the organization comply with the public inspection requirements for returns and exemption applications	? 83a	Х
b Did the organization comply with the disclosure requirements relating to guid pro quo contributions?	83b	Х
84a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
	auffe wore	
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or quantitative to the contributions of quantitative to the contribution of quantitative to the co	giits were . 84b	N/A
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85 a	N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?	. 85 b	N/A
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	received a	
waiver for proxy tax owed for the prior year.		
c Dues, assessments, and similar amounts from members	N/A	
d Section 162(e) lobbying and political expenditures	N/A	
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e	N/A	
f Taxable amount of lobbying and political expenditures (line 85d less 85e).	N/A	
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	. 85 g	N/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of		
dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85 h	N/A
86 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on		
line 12	N/A	
b Gross receipts, included on line 12, for public use of club facilities 86b	N/A	
87 501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a	N/A	
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	27.72	
	N/A	
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or a or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.	partnership,	
If 'Yes,' complete Part IX	7701-3:	X_
89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under		
section 4911 ► 0.; section 4912 ► 0.; section 4955 ►	0.	
b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit trans	saction	
during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a	statement 89b	x
explaining each transaction	630	<u> </u>
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	•	0.
year under sections 4912, 4955, and 4958 d Enter: Amount of tax on line 89c, above, reimbursed by the organization	-	0.
90 a List the states with which a copy of this return is filed None		
b Number of employees employed in the pay period that includes March 12, 2004 (See instructions.)	90 b	J 0
	.5-320-7142	<u> </u>
	+ 4 > 37212	
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here	N/	'A -
and enter the amount of tax-exempt interest received or accrued during the tax year.	▶ 92	N/A
BAA		n 990 (2004)

Note:	Enter gross amounts unless		ousiness income		tion 512, 513, or 514	(E)
otherw	usa indicated	(A) Business code	(B) Amount	Exclusion code	(D) Amount	Related or exempt function income
93	Program service revenue					
a b						<u> </u>
d						
е						
	Medicare/Medicaid payments.					
_	Fees & contracts from government agencies Learning Membership dues and assessments .					
9 5	Interest on savings & temporary cash invmnts.	<u> </u>				
96	Dividends & interest from securities					4,881.
97	Net rental income or (loss) from real estate:			ai iii		and the second second second second
	debt-financed property					
	not debt-financed property					
98 99	Net rental income or (loss) from pers prop Uther investment income			 		7,527.
100	Gain or (loss) from sales of assets					1,527.
101	other than inventory Net income or (loss) from special events			1	31,739.	
102	Gross profit or (loss) from sales of inventory			†		
	Other revenue: a		antagas and an anna an a	and a second of the second of		and the same and the
b	ATTORNEY'S FEES RECOV			2	6,482.	
C				-		
e						
_	Subtotal (add columns (B), (D), and (E))	and a second second second		and the same and t	38,221.	12,408.
	Total (add line 104, columns (B), (D), a	nd (E))			>	50,629.
Note:	Line 105 plus line 1d, Part I, should equa					
	Relationship of Activities to	the Accom	plishment of Ex			
	Relationship of Activities to No. Explain how each activity for which	the Accom	plishment of Ex orted in column (E)	of Part VII contrib	uted importantly to the	e accomplishment
Line	Relationship of Activities to	the Accom	plishment of Ex orted in column (E)	of Part VII contrib	uted importantly to the	e accomplishment
Line	Relationship of Activities to No. Explain how each activity for which	the Accom	plishment of Ex orted in column (E)	of Part VII contrib	uted importantly to the	e accomplishment
Line	Relationship of Activities to No. Explain how each activity for which	the Accom	plishment of Ex orted in column (E)	of Part VII contrib	uted importantly to the	e accomplishment
Line	Relationship of Activities to No. Explain how each activity for which	the Accom	plishment of Ex orted in column (E)	of Part VII contrib	uted importantly to the	e accomplishment
Line V N/A	Relationship of Activities to No. Explain how each activity for which of the organization's exempt purpo	the Accom income is repises (other than	plishment of Ex orted in column (E) in by providing funds	of Part VII contrib for such purposes	uted importantly to th	e accomplishment
Line V N/A	Relationship of Activities to No. Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa	the Accom I income is represes (other than	plishment of Exorted in column (E) in by providing funds	of Part VII contribition for such purposes	uted importantly to th	e accomplishment
Line V N/A	Relationship of Activities to Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa (A)	the Accom income is repises (other than	plishment of Exported in column (E) in by providing funds aries and Disre	of Part VII contribition for such purposes garded Entities C)	uted importantly to the control of t	
Line V N/A	Relationship of Activities to No. Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa	the Accom income is represes (other than	plishment of Exorted in column (E) in by providing funds aries and Disre (f Nature o	of Part VII contribition for such purposes	uted importantly to the control of t	(E)
Line V N/A	Relationship of Activities to Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa (A) Ime, address, and EIN of corporation,	the Accom Income is represent (other than	plishment of Exorted in column (E) in by providing funds aries and Disre Nature of State of	of Part VII contribition for such purposes garded Entities C)	uted importantly to the). i (See instructions.) (D) Total	(E) End-of-year
Line V N/A	Relationship of Activities to Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa (A) Ime, address, and EIN of corporation,	the Accom Income is represent (other than	plishment of Exorted in column (E) by providing funds aries and Disre Nature of States of Stat	of Part VII contribition for such purposes garded Entities C)	uted importantly to the). i (See instructions.) (D) Total	(E) End-of-year
Line V N/A	Relationship of Activities to Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa (A) Ime, address, and EIN of corporation,	the Accom Income is represent (other than	plishment of Exorted in column (E) by providing funds aries and Disre Nature of States Stat	of Part VII contribition for such purposes garded Entities C)	uted importantly to the). i (See instructions.) (D) Total	(E) End-of-year
Line V N/A N/A N/A	Relationship of Activities to Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa (A) Ime, address, and EIN of corporation, partnership, or disregarded entity	able Subsidi (B) Percentage of ownership inter	plishment of Exported in column (E) by providing funds aries and Disre Nature of the state of	of Part VII contribition for such purposes garded Entities C) f activities	uted importantly to the control of t	(E) End-of-year assets
Line V N/A N/A N/A	Relationship of Activities to Solution Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa (A) Impartnership, or disregarded entity	the Accom Income is represent (other than able Subsidi (B) Percentage of ownership interview	plishment of Exorted in column (E) or by providing funds aries and Disre Nature of State of	of Part VII contribit for such purposes garded Entities C) f activities conal Benefit C	uted importantly to the contracts (See instructions.) (D) Total income	(E) End-of-year assets
Line V N/A N/A N/A	Relationship of Activities to Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa (A) Impartmentship, or disregarded entity Information Regarding Transpartmentship, or disregarded entity	the Accom Income is represent formation of the Subsidian (B) Percentage of ownership interview.	plishment of Exorted in column (E) a by providing funds aries and Disre Nature of the state of	of Part VII contribit for such purposes garded Entities C) f activities conal Benefit Con a personal benefit con	ited importantly to the contracts (See instructions.) (D) Total income	(E) End-of-year assets
Line V N/A N/A N/A Line Na N/A Line Na N/A	Relationship of Activities to Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa (A) Impartmership, or disregarded entity Information Regarding Transhid the organization, during the year, receive any fundamental contents.	the Accom Income is represent for the second income is represent for the second income is represent for the second income is represented by the second income incom	plishment of Exorted in column (E) by providing funds aries and Disre Nature of the state of t	of Part VII contribit for such purposes garded Entities C) f activities conal Benefit Con a personal benefit con	ited importantly to the contracts (See instructions.) (D) Total income	(E) End-of-year assets assets
Line V N/A N/A N/A Line Na N/A Line Na N/A	Relationship of Activities to Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa (A) Ime, address, and EIN of corporation, partnership, or disregarded entity Information Regarding Tranship the organization, during the year, receive any funding the organization, during the year, payote: If 'Yes' to (b), file Form 8870 and Founding Tranship the year in the partnership that the organization is the year in the y	the Accom Income is represent for the second income is represent for the second income is represent for the second income is represented in the second income in the second in the second income in the second in the secon	aries and Disre Nature of the structure	garded Entities C) f activities Gonal Benefit Con a personal benefit cor	intracts (See instructions.) Ontracts (See instructions.) ontracts (See instructions.)	(E) End-of-year assets uctions.) . Yes X No . Yes X No
Line V N/A N/A N/A Line No	Relationship of Activities to Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa (A) Ime, address, and EIN of corporation, partnership, or disregarded entity Information Regarding Tran and the organization, during the year, receive any function of the organization, during the year, pay the: If 'Yes' to (b), file Form 8870 and For Under penalties of perjury, I declare that I have true, correct, and complete Declaration of present the property of the correct, and complete Declaration of present the correct and	the Accom Income is represent for the second income is represent for the second income is represent for the second income is represented in the second income in the second in the second income in the second in the secon	aries and Disre Nature of the structure	garded Entities C) f activities Gonal Benefit Con a personal benefit cor	i (See instructions.) (D) Total income ontracts (See instructions) fit contract?	(E) End-of-year assets uctions.) . Yes X No . Yes X No
N/A N/A N/A Pigat	Relationship of Activities to Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa (A) Ime, address, and EIN of corporation, partnership, or disregarded entity Information Regarding Tran and the organization, during the year, receive any function of the organization, during the year, pay the: If 'Yes' to (b), file Form 8870 and For Under penalties of perjury, I declare that I have true, correct, and complete Declaration of present the property of the correct, and complete Declaration of present the correct and	the Accom Income is represent form than the ses (other than off the ses (other than the ses (other	plishment of Exorted in column (E) by providing funds aries and Disre Nature of State St	garded Entities C) f activities conal Benefit Con a personal bene	intracts (See instructions.) Ontracts (See instructions.) ontracts (See instructions.)	(E) End-of-year assets uctions.) . Yes X No . Yes X No
Line V N/A N/A N/A N/A Line No	Relationship of Activities to Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa (A) Ime, address, and EIN of corporation, partnership, or disregarded entity Information Regarding Transition and the organization, during the year, receive any fund the organization, during the year, payone: If 'Yes' to (b), file Form 8870 and Foundary in the year of period to the organization of preference, and complete Declaration of preference.	the Accom Income is represent form than the ses (other than off the ses (other than the ses (other	plishment of Exorted in column (E) by providing funds aries and Disre Nature of State St	garded Entities C) f activities conal Benefit Con a personal bene	ontracts (See instructions.) Total income ontracts (See instructions.) fit contract? fit contract? Ints, and to the best of my knowledge B 1 2	(E) End-of-year assets uctions.) . Yes X No . Yes X No nowledge and belief, it is
N/A N/A N/A Pleas	Relationship of Activities to Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa (A) Ime, address, and EIN of corporation, partnership, or disregarded entity Information Regarding Transition and the organization, during the year, receive any fund the organization, during the year, payone: If 'Yes' to (b), file Form 8870 and Foundary in the year of period to the organization of preference, and complete Declaration of preference.	the Accom Income is represent form than the ses (other than off the ses (other than the ses (other	plishment of Exorted in column (E) by providing funds aries and Disre Nature of State St	garded Entities C) f activities conal Benefit Con a personal bene	ontracts (See instructions.) ontracts (See instructions.) fit contract? intract? i	(E) End-of-year assets uctions.) . Yes X No . Yes X No nowledge and belief, it is
N/A N/A N/A Pleas	Relationship of Activities to Explain how each activity for which of the organization's exempt purpo Information Regarding Taxa (A) Ime, address, and EIN of corporation, partnership, or disregarded entity Information Regarding Transition and the organization, during the year, receive any fund the organization, during the year, payone: If 'Yes' to (b), file Form 8870 and Foundary in the year of period to the organization of preference, and complete Declaration of preference.	the Accom Income is represent form than the ses (other than off the ses (other than the ses (other	plishment of Exorted in column (E) by providing funds aries and Disre Nature of State St	garded Entities C) f activities conal Benefit Con a personal bene	ontracts (See Instructions.) Total Income ontracts (See Instructions.) fit contract? fit contract? onts, and to the best of my knowledge Date	(E) End-of-year assets uctions.) . Yes X No . Yes X No nowledge and belief, it is

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information — (See separate instructions.)
► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.

2004

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

AMERICAN CIVIL LIBERTIES UNION FOUNDATION INC

Employer identification number

62-0988329

Part Compensation of the Five Higher (See instructions. List each one. If there	est Paid Employees Other are none, enter 'None.')	r Than Officers,	Directors, and	Trustees
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
NONE OVER \$50,000				
· · · · · · · · · · · · · · · · · · ·		0.	0.	0.
Total number of other employees paid over \$50,000			markin veliker i krejere i i i Storikarin veliker	
Compensation of the Five High (See instructions. List each one (whether	est Paid Independent Cor	tractors for Pro	fessional Servi e.')	
(a) Name and address of each independent contra	actor paid more than \$50,000	(b) Type	of service	(c) Compensation
NONE OVER \$50,000				0.
		-		0.
Total number of others receiving over \$50,000 for professional services	(

Sche	dule	A (Form 990 or 990-EZ) 2004 AMERICAN CIVIL LIBERTIES UNION 62-098832	9	F	age 2
Par	Eile	Statements About Activities (See Instructions.)		Yes	No
1		ing the year, has the organization attempted to influence national, state, or local legislation, including any attempt influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid incurred in connection with the lobbying activities \$ N/A			
		ist equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1 1		Х
	Org	nanizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other anizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the bying activities.			
2	sub	ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with any istantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any able organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal seficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.)			
ā	Sal	e, exchange, or leasing of property?	2a		Х
ŧ	Len	iding of money or other extension of credit?	2b		Х
C	Fur	nishing of goods, services, or facilities? See Form 990, Part V	2c		Х
c	l Pay	ment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	Х	
•	Tra	nsfer of any part of its income or assets?	2e		х
38	Do	you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an ilanation of how you determine that recipients qualify to receive payments.)	3a		X
		olanation of how you determine that recipients qualify to receive payments.)you have a section 403(b) annuity plan for your employees?	3b		X
48	Dıd	you maintain any separate account for participating donors where donors have the right to provide advice		-	
		the use or distribution of funds?	4a 4b		X
***		Reason for Non-Private Foundation Status (See instructions.)	1		
7. Sep.	. (.).				
The 5	orga □	nization is not a private foundation because it is: (Please check only ONE applicable box.) A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6	Н	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7	Ħ	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(III).			
8		A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).	_		
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital and state			
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section (Also complete the Support Schedule in Part IV-A.)	n 170(t	o)(1)((A)(iv).
11 a	X	An organization that normally receives a substantial part of its support from a governmental unit or from the genera Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)	l public	•	
111) [A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
12		An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, a from activities related to its charitable, etc, functions — subject to certain exceptions, and (2) no more than 33-1/3% from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquiring organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)	of its s	ะแทกด	ceipts ort
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports or described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a) section 509(a)(3).)			
		Provide the following information about the supported organizations. (See instructions.)			
		(a) Name(s) of supported organization(s)	(b) Lir	ne nu n abo	ımber ove
14	Г	An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)			
		Schodule A (Form 900 or	orm 00	<u> </u>	7) 200/

Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting Calendar year (or fiscal year beginning in) . . . (e) Total **(a)** 2003 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)... 133,766 119,183 90,130 484,746. 141,667 16 Membership fees received Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's 34,902 44,919 37,589 54,416 171,826. charitable, etc, purpose Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 . 13,930 -1,655 9,094 12,938. 34,307. Net income from unrelated business activities not included in line 18. Tax revenues levied for the 20 organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets 190,499 169,700 173,196 157,484 690,879 Total of lines 15 through 22 ... 132,111 128,277 Line 23 minus line 17 155,597 103,068. 519,053 1,905 1,697 1,575. Enter 1% of line 23 10,381 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26 a b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your 26 b return. Enter the total of all these excess amounts. c Total support for section 509(a)(1) test: Enter line 24, column (e).... 26 c 519,053 d Add: Amounts from column (e) for lines: 18 34,307. 19 26 b 26 d 34,307. 484,746. e Public support (line 26c minus line 26d total) 26e f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26 f 93.39 % Organizations described on line 12: N/A a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year: ____ (2002) ____ (2001) ___ (2000) bFor any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2003) _ _ _ _ (2002) _ ____ (2001) _ _ c Add: Amounts from column (e) for lines: 15 16 20 **27** c 17 21 27 d d Add: Line 27a total. and line 27b total e Public support (line 27c total minus line 27d total) 27 e f Total support for section 509(a)(2) test: Enter amount from line 23, column (e). g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 27 g 왕 27 h કૃ h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

	(To be completed ONLY by schools that	checked the box on li	ne 6 in Part IV)		1	N/A		
							Yes	No
29	Does the organization have a racially nondiscriming other governing instrument, or in a resolution of i	natory policy toward st	tudents by statement	ın ıts charter, byla	ws,	29		
20								
30	Does the organization include a statement of its r catalogues, and other written communications with and scholarships?	racially nondiscriminate the the public dealing w	rith student admissior	ns, programs,	222	30		
31	Has the organization publicized its racially nondisthe period of solicitation for students, or during the makes the policy known to all parts of the general	ne registration period it	f it has no solicitation	oadcast media dur program, in a way	∕that 🟴	31		
	If 'Yes,' please describe; if 'No,' please explain. (If you need more space	ce, attach a separate					
					- P			
								Ž.
	Does the organization maintain the following: a Records indicating the racial composition of the s					32a		
	Records documenting that scholarships and other nondiscriminatory basis?	r financial assistance a	are awarded on a rac	iatly		32 b		
	c Copies of all catalogues, brochures, announceme	ents, and other written	communications to t	he public dealing	Ī			
	with student admissions, programs, and scholars d Copies of all material used by the organization or	hips?			—	32 c 32 d		
•								
	If you answered 'No' to any of the above, please							
33	Does the organization discriminate by race in any	way with respect to:						
•	a Students' rights or privileges?	•••••				33 a		
ı	b Admissions policies?					33 b		
(c Employment of faculty or administrative staff?					33 c		
(d Scholarships or other financial assistance?					33 d		
•	e Educational policies? .	•				33 e		
1	f Use of facilities?					33 f		
(g Athletic programs?					33 g		
ı	h Other extracurricular activities?					33 h		
	If you answered 'Yes' to any of the above, please							
					1			
						1971 1972		
34	a Does the organization receive any financial aid o	or assistance from a go	overnmental agency?			34 a		
	b Has the organization's right to such aid ever bee					34 b		
	If you answered 'Yes' to either 34a or b, please of							
35	Does the organization certify that it has complied sections 4.01 through 4.05 of Rev Proc 75-50, 19 nondiscrimination? If 'No,' attach an explanation	d with the applicable re 975-2 C.B. 587, covering	equirements of ng racial			35		

Chec	ck ▶ a If the organ	zation belongs to an aff	filiated group. Check	▶ b If you	check	ed 'a' and 'li	mited cont	rol' provisions apply.
		imits on Lobbying	-			(a Affiliated tota		(b) To be completed for ALL electing
	(The tern	n 'expenditures' means	amounts paid or incurre	d.)				organizations
36	Total lobbying expendit	tures to influence public	opinion (grassroots lob	bying)	36			
37	Total lobbying expendit	tures to influence a legis	slative body (direct lobb	yıng)	37			
38	Total lobbying expendit	tures (add lines 36 and	37)		38			
39	Other exempt purpose	expenditures			39		-	
40	Total exempt purpose	expenditures (add lines	38 and 39) .		40			The state of the s
41	Lobbying nontaxable a	mount. Enter the amour	nt from the following tab	ole —				
	If the amount on line 4	0 is — The	lobbying nontaxable a	mount is —			\$	
	Not over \$500,000	20%	of the amount on line	40				
	Over \$500,000 but not over \$	1,000,000 \$100,	000 plus 15% of the excess o	ver \$500,000	-	W 1		
	Over \$1,000,000 but not over	\$1,500,000 \$175,	000 plus 10% of the excess o	ver \$1,000,000 -	41	No se establishment all severe an analysis	and to design to recover	The control of the co
	Over \$1,500,000 but not over	\$17,000,000 \$225,	000 plus 5% of the excess ov	er \$1,500,000	9			
	Over \$17,000,000	\$1,0					ž Ž	
42	Grassroots nontaxable	amount (enter 25% of I	ıne 41)		42			
43	Subtract line 42 from li	ne 36. Enter -0- if line 4	12 is more than line 36.		43			
44	Subtract line 41 from li	ne 38. Enter -0- if line 4	11 is more than line 38		44			7.7
	Caution: If there is an	amount on either line 4	3 or line 44, you must f	ile Form 4720.	2.3.3	and the second		
	(Some organ	nizations that made a se	Averaging Period ection 501 (h) election do the instructions for line	not have to co	mplete	(h) all of the five	ve columns	s below.
	.,,		Lobbying Expend	ditures During 4	-Year	Averaging P	Period	1
	Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2003	(c) 2002		(0 20		(e) Total
45	Lobbying nontaxable amount			***	A Section 19		enter essent a	
46	Lobbying ceiling amount (150% of line 45(e))						a a a se a c	4
47	Total lobbying expenditures							
48	Grassroots non- taxable amount			egyn - gygneriki, eg Ayyan s e nn	1871 - 1921	e warenda Teberar	4 27 ° 3 577 933	
49	Grassroots ceiling amount (150% of line 48(e))			and the second second	,	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		
	Grassroots lobbying expenditures							
2	Lobbying A	only by Nonelect	i ng Public Charitie at did not complete Pa	!S rt VI-A) <i>(</i> See ins	structio	ns.)		N/A
	<u> </u>		<u>.</u>					N/A
atter	ng the year, did the organity and to influence public of	anization attempt to initi opinion on a legislative r	natter or referendum, t	arough the use o	, iriciu of:	uning any	Yes No	Amount
	Volunteers						-	
	b Paid staff or managen				 ouah h		- -	
	c Media advertisements				_	··· r		
	d Mailings to members,							
	Publications, or publis	• •					- 	
	F Grants to other organi							
	g Direct contact with leg							
	h Rallies, demonstration	· -		-				
	Total lobbying expend		•	-		••		
		ove, also attach a stateme						

N/A

Part VIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See Instructions)

51 Did the	ne reporting organization - Code (other than section	directly or in	directly engage in any of the follow rganizations) or in section 527, rela	ing with any other organization describe iting to political organizations?	ed in section	on 50	I(c)
			o a noncharitable exempt organizat		ſ	Yes	No
	ash	-			51 a (i)		X
	Other assets				a (ii)		X
b Other	r transactions:						
(i) S	ales or exchanges of ass	ets with a no	oncharitable exempt organization		b (i)		X
(ii)F	Purchases of assets from	a noncharita	ble exempt organization		b (ii)		X
(iii)F	Rental of facilities, equipm	ent, or othe	r assets	••	b (iii)		<u>X</u>
(iv)F	Reimbursement arrangeme	ents			b (iv)		<u> </u>
(v)L	oans or loan guarantees.				b (v)		<u>X</u>
(vi)F	erformance of services o	r membershi	p or fundraising solicitations		b (vi)		<u>X</u>
c Shari	ng of facilities, equipmen	t, mailing lis	ts, other assets, or paid employees		c	لــِــــــــــــــــــــــــــــــــــ	X
d If the the g any t	answer to any of the abo oods, other assets, or ser ransaction or sharing arra	ove is 'Yes,' rvices given angement, st	complete the following schedule. Co by the reporting organization. If the now in column (d) the value of the ç	olumn (b) should always show the fair r organization received less than fair ma goods, other assets, or services receive	narket value arket value d:	in In	
(a) Line no.	(b) Amount involved		(c) noncharitable exempt organization	(d) Description of transfers, transactions, and			ts
N/A							
	e organization directly or in the control of the co		liated with, or related to, one or mother than section 501(c)(3)) or in se	ore tax-exempt organizations ction 527?	► Ye	s X	No
D II IC	(a)	J Schedule.	(b)	(c)			
	Name of organization		Type of organization	(c) Description of relation	nship		
N/A							
							

2	n	A	1
Z	u	u	4

Federal Statements

Page 1

Client ACLU5016

AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC.

62-0988329

03:53PM

8/23/05

Statement 1 Form 990, Part I, Line 9 Net Income (Loss) from Special Events

Special Events	Gross <u>Receipts</u>	Less Contri- butions	Gross Revenue	Less Direct Expenses	Net Income (Loss)
BILL OF RIGHTS CELEBRATION Total	\$ 51,505.	4,330.	47,175.	15,436.	31,739.
	\$ 51,505.	\$ 4,330.	\$ 47,175.	\$ 15,436.	\$ 31,739.

Statement 2 Form 990, Part II, Line 43 Other Expenses

	(A)	(B)	(C)	(D)	
	Total	Program <u>Services</u>	Management & General	<u>Fundraising</u>	
ADVERTISING	627.	376.	126.	125.	
BANKING FEES	80.	48.	16.	16.	
COMPUTER PROFESSIONAL	280.	168.	56.	56.	
COMPUTER SERVICES	746.	448.	149.	149.	
FUND RAISING	335.			335.	
GRANT EXPENSES	294.	176.	59.	59.	
INSURANCE	819.	491.	164.	164.	
LITERATURE RE-SALE	120.	72.	24.	24.	
LITIGATION SERVICES	3,283.	3,283.			
MEETINGS	55.	33.	11.	11.	
MISCELLANEOUS	351.	211.	70.	70.	
NEWSLETTER	2,832.	1,699.	567.	566.	
PUBLIC EDUCATION	5,364.	5,364.			
	Total \$ 15,186.	<u>\$ 12,369.</u>	\$ 1,242.	\$ 1,575.	

Statement 3 Form 990 , Part III Organization's Primary Exempt Purpose

TO PROTECT AND EXPAND INDIVIDUAL LIBERTIES THROUGH PUBLIC EDUCATION; TO PROVIDE LEGAL ASSISTANCE TO AGGRIEVED PERSONS; TO PROVIDE BILL OF RIGHTS PROTECTION

Statement 4 Form 990, Part IV, Line 57 Land, Buildings, and Equipment

Category		Basis	 Accum. Deprec.	Book Value
Furniture and Fixtures Machinery and Equipment	:	\$ 1,497. 14,397.	\$ 193. 13,100.	\$ 1,304. 1,297.
	Total 3	\$ 15,894.	\$ 13,293.	\$ 2,601.

2004	Federal Statemer			Page 2
Client ACLU5016		62-0988329		
8/23/05		-	······································	03.53PN
Statement 5 Form 990, Part IV, Line 58 Other Assets				
DUE FROM ACLU OF TENNESSEE Rounding	C (AFFILIATE)		\$ Total <u>\$</u>	1,780. 3. 1,783.
Statement 6 Form 990, Part V List of Officers, Directors, Truste	es, and Key Employees Title and Average Hours	Compen-	Contri- bution to	
Name and Address	Per Week Devoted	sation	EBP & DC	
HEDY WEINBERG P.O. BOX 120160 NASHVILLE, TN 37212	Executive Direc 40	\$ 39,936.	\$ 0.	\$ 0.
BRUCE BARRY 401 21st AVENUE SOUTH NASHVILLE, TN 37203	President None	0.	0.	0.
SUSAN L. KAY 131 21ST AVENUE SOUTH NASHVILLE, TN 37203	Vice President None	0.	0.	0.
PAULETTE WILLIAMS 1505 CUMBERLAND AVENUE KNOXVILLE, TN 37996	Secretary None	0.	0.	0
TOM BIBLER 909 OAK STREET CHATTANOOGA, TN 37403	Treasurer None	0.	0.	0
JOSEPH SWEAT 3517 CENTRAL AVENUE NASHVILLE, TN 37205	NAT'L BOARD REP None	0	0.	0
DAVID BAKER 810 BROADWAY NASHVILLE, TN 37203	BOARD MEMBER None	0	. 0.	0
EUGEN BARTOO 4115 ST. ELMO AVENUE CHATTANOOGA, TN 37409	BOARD MEMBER None	0	. 0.	0
GLEN CARTER 2120 GOLDEN OAK LANE MADISON, TN 37115	BOARD MEMBER None	0	. 0.	0
PRISCILLA CRAIG 925 MOLEAH COURT HERMITAGE, TN 37076	BOARD MEMBER None	0	. 0.	0

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Statement 6 (continued)	
Form 990, Part V	
List of Officers, Directors, Trustees, and Key Emplo	yees

Name and Address	Title and Average Hours <u>Per Week Devoted</u>	 Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
SONNYE DIXON, JR. 1107 CHAPEL AVENUE NASHVILLE, TN 37206	BOARD MEMBER None		\$ 0.	
GINNY FLACK 1202 STAHLMAN BUILDING NASHVILLE, TN 37201	BOARD MEMBER None	0.	0.	0.
MONA FREDERICK 5037 VILLA CREST DRIVE NASHVILLE, TN 37220	BOARD MEMBER None	0.	0.	0.
MARK JORDAN 6624 JOCELYN HOLLOW ROAD NASHVILLE, TN 37205	BOARD MEMBER None	0.	0.	0.
BRUCE KRAMER 80 MONROW STREET, G1 MEMPHIS, TN 38103	BOARD MEMBER None	0.	0.	0.
BERNIE MCNABB 804 FOX ROAD NASHVILLE, TN 37922	BOARD MEMBER None	0.	0.	0.
SHEILA PETERS 4811 FAIRMEADE COURT NASHVILLE, TN 37218	BOARD MEMBER None	0.	0.	0.
BEN PRESNELL P.O. BOX 172 TAZEWELL, TN 37218	BOARD MEMBER None	0.	0.	0.
ABBY RUBENFELD 2409 HILLSBORO ROAD, SUITE 200 NASHVILLE, TN 37203	BOARD MEMBER None	0.	0.	0.
CHARLES SIENKNECHT 605 GLENWOOD AVENUE, SUITE 100 NASHVILLE, TN 37404	BOARD MEMBER None	0.	0.	0.
VATASAL THAKKAR 1708 21ST AVENUE S, #139 NASHVILLE, TN 37212	BOARD MEMBER None	0.	0.	0.
ERIKA WOLLAM-NICHOLS 715 SKYVIEW DRIVE NASHVILLE, TN 37206	BOARD MEMBER None	0.	0.	0.

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AMERICAN CIVIL LIBERTIES UNION FOUNDATION, INC.

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Statement 6 (continued)
Form 990, Part V
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
JOE SWEAT 3517 CENTRAL AVENUE NASHVILLE, TN 37205	BOARD MEMBER None	\$ 0.	\$ 0.	\$ 0.
	Total	\$ 39,936.	<u>\$ 0.</u>	\$ 0.