

I am considering adding your organization as a recipient to the Trust's annual charitable contributions.

Please correspond with information about your organization.

WPT

In the 1960s the English world-renown nerve specialist, Professor Roger Wyburn-Mason, M.D., Ph.D., had two nerve diseases carrying his name. He tackled the subject of rheumatoid disease, his clinical analysis culminating in a 478 page book now featured on our website. He also successfully treated desperate people on every continent.

Jack M. Blount, M.D. of Philadelphia, MS and Gus J. Prosch, Jr, M.D. of AL, both arthritics, were cured by Wyburn-Mason's methods.

After returning to his medical practice, Dr. Blount cured me within six weeks in 1981. He'd forsaken his country practice having suffered as a cripple, suicidal alcoholic and drug addict. Of course his anti-social behavior had been dictated by the almost intolerable pain of rheumatoid arthritis which had sorely damaged hands, feet and hips from the time of his medical school days until his 50s.

Dr. Blount began treating arthritics as did Dr. Prosch, both men eventually treating about 17,000 in their respective clinics, all referred by word-of-mouth.

South African Dr. Paul K. Pybus -- surgeon and former student and "house" doctor under Professor Roger Wyburn-Mason -- joined us, adding his discoveries.

Together, these men (and other former arthritics), chose me to help form this foundation in 1982 with the goal of spreading important treatment information throughout the world.

We were not established until we'd attempted passing this exciting new information on to allegedly interested organizations, but then we encountered stiff barriers -- finding that it was "politically incorrect" to declare rheumatoid disease, including rheumatoid arthritis, curable!

We were chartered in Tennessee in 1982 and began direct mail solicitation to fund research. We funded research at Medical School of Virginia, Bowman Gray School of Medicine, Vanderbilt University, University of Tennessee and South Africa.

Since then increasing U.S. Postal costs have swallowed much non-profit direct mail profits and more and more charities have become competitors having entered the direct mail approach to fund raising. We backed into a direct mail Sweepstake program that has kept our tiny office alive but has not helped get out our message.

Our cost-to-benefit ratio has always been high -- but I know of no other charity that advertises that whether or not a donation is sent we'll tell you how to

get well. We'll send free books and articles, and we'll refer you to physicians dedicated toward your wellness!

This is a difficult set of functions to measure with one accounting ratio.

The internet has proven to be a great boon, as we now receive more than 1,000 visitors per day from all over the world.

Our feedback experience -- clinically and through this office -- convinces us that we know the major causes of rheumatoid diseases, numbering about 100 by name, including rheumatoid arthritis.

We've been supported above the average for small charities via wills -- which tells us that folks really want answers -- not more huxterism about "send us more money and we'll search for a cure!"

Last year we received sufficient funds from an estate so that we could dream a little higher. We purchased 3.75 acres for \$400,000, prime land directly in front of City of Fairview's new city hall, with new banks on two streets directly across from us. Here we hope to build a shopping center surrounding a medical center.

The shopping center profits will be used to support the medical center.

The medical center will be rather unique.

We will bring together all the various treatments that we know arthritics must investigate to become well. Although we have about 200 referral physicians, for many years I've had to refer folks to several different health professionals, usually across state boundaries, to explore the requisite variety of treatments, as described in the enclosed "How Do I Cure My Rheumatoid Arthritis." Drs. Prosch and Blount applied only part of our recommendations, yet each acquired a consistent 75-80% cure rate for so-called "incurable" rheumatoid disease!

Folks seldom have the funding to travel here and there simply to investigate this or that modality.

Our plans call for building first a small \$1,500,000 cluster, after which we expect several more of the same size to grow easily via pre-leasing. Once begun, it will grow fast.

In addition to treating folks, this medical center will serve as a teaching platform for visiting health professionals, and they, in turn, can further teach us.

Obviously the more medical-center-dedicated-funding we receive, the sooner we'll be free of long-term construction loans.

Meanwhile, we've also initiated plans to utilize the internet more heavily for fundraising, especially from those (better than 1,000 per day) now clicking on to our site.

Our website has grown dramatically.

We provide free books, articles, newsletters and physician referrals to anyone of concern. We also freely answer letters and telephone call queries.

Arthritis Trust of America/Rheumatoid Disease Foundation
<http://www.arthritistrust.org>

Thank you for your return letter

Why does your organization not meet the standards of charitable accountability with the Better Business Bureau www.give.org, have an F evaluation with the American Institute of Philanthropy www.charitywatch.org, and only rate 1 star with Charity Navigator at www.charitynavigator.org?

WPT

The blunt answer to your questions of 26 February 2007 is that the self-appointed charity watchdog organizations are too lazy to establish criteria related to social need and social good.

An equally accurate answer is that you should ask each of those organizations why they've rated us so low. They're the ones doing the rating, not us.

*Back in the late 70s and early 80s all the self-appointed watchdog agencies convinced most of the state charity regulators to use a single cost-to-benefit ratio to determine eligibility (and fraud) regarding charities and their state registrations. A number of U.S. Supreme Court cases concluded that to do so would be a violation of constitutional rights. Court reasoning -- in far more detail than I can lay out here -- is found in *Schaumburg v. Citizens for a Better Environment* [444 U.S. 620 (1980)], *Secretary of State of Md. v. Joseph H. Munson Co.*, [467 U.S. 947 (1984)], *Riley v. National Federation of Blind of N.C., Inc.* [487 U.S. 781 (1988)]. Those decisions held that certain regulations of charitable subscriptions, barring fees in excess of a prescribed level, effectively imposed prior restraints on fundraising, and were therefore incompatible with the First Amendment.*

Despite this strong court judgment, self-appointed watchdog agencies -- without any more legal stature than any other non-profit charity -- continued to propagandize the wisdom of contributing charity dollars to only those with a single accounting ratio that seems to reflect favorably on the charity.

Of course, continued use of this spurious figure also acts as a self-fulfilling prophecy. Small charities -- those without wide-spread public recognition -- are locked out. They cannot change their mode of solicitation because their cost-to-benefit ratio is too high, and their cost-to-benefit ratio is too high because folks are easily swayed by these self-appointed watch-dog agencies. (Catch 22)

Additionally -- at least in my opinion -- the large easily recognized charities have a great deal of input into establishment of criteria used by the self-appointed watchdog agencies. Small charities, such as ourselves, have no input.

It is to the benefit of the large, established charities to maintain this status quo.

Finally, but not least, thousands of "volunteer" programs are encouraged each year by large, well-known charities to collect money "to research and to find the cure" for this or that.

No one, to my knowledge -- least of all the self-appointed watchdog agencies -- questions the final disposition of these funds. Of course they are passed on to the large, well-known agencies who, in turn, pass them on to "proper researchers," which means that large well-established pharmaceutical companies end up receiving additional funding for research aimed at symptom relief rather than cures. Let's see, we've had better than 55 years of war against cancer, and only the statistical weasel-wording has changed!

Incidentally, in a recent Wall Street Journal article, Bennett Weiner, Chief Operating Officer of the BBB's Wise Giving Alliance was quoted as saying, "If a charity spends 80% of its expenses on programs, it doesn't necessarily mean that it is doing a better job than one that is spending 70%. Charities are more than financial statements, and people shouldn't make donation decisions solely on financial statements."