Form	990	Return of Organization Exempt From In	come 1	ax	OMB No 1545-0047
Form		Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code			2008
			eporting req	uirements	Open to Public Inspection
					, 20 09
	under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) The organization may have to use a copy of this return to satisfy state reporting requirement and its applicable applicable. For the 2008 calendar year, or tax year beginning July 1 .2008, and ending June 30 Creek if applicable. Plass C Name of ange Business As The American TPF: America Needs Fatima 2.2 Name change Plass C Name of organization may the or outinty, and ZIP + 4 C 2.4 Name darge P.O. Box 787 (78 (78 (78 Formation F Name and address of principal officer Raymond E. Drake H(a) is the a grap. Application pending JSB Jefferson Rd., Spring Grove, PA 17362 H(b) Ave all affinial if "No" affinial the values of the organization '' on or affinial show with the organization'' and private property. To spread the message throughout America. For this end, the corporation organized over 3,500 Public Square Ross in October, 2008. 1 Briefly describe the organization's mission or most significant activities: To further the values of by defending the principles of tradition, family and private property. To spread the message in October, 2008. 2 Check this box ト if the organization discontinued is operations or disposed of more than 25% of its assets. 3 Number of voting members of the governing body (Part V			ver identification number	
		use IRS Doing Business As The American TEP: America Needs Eatima		23	7325778
	•	print or Number and street (or PO box if mail is not delivered to street address) Room/su	te	E Teleph	one number
	-	See P.O. Box 787		(785)	584-6268
		tions. Rossville, KS 66533-0787		G Gross re	eceipts \$ 7,302,195
	pplication pending	F Name and address of principal officer Raymond E. Drake	H(a) Is the	s a group return	n for affiliates? Yes 🗹 No
		1358 Jefferson Rd., Spring Grove, PA 17362	H(b) Are	all affiliates	Included? Yes No
<u> </u>	Tax-exempt status	✓ 501(c) (3) ◄ (insert no.) 4947(a)(1) or 527	If "1	lo," attach a	list. (see instructions)
				1	
			on. 1973	M State o	f legal domicile NY
Pa					Anistian Civilination
	1 Briefly de	scribe the organization's mission or most significant activities: 10 tu	ther the va	ilues of C	August adv of Estimo
ø					
anc			one square	Rosary	Rames for America
vert			250/ of the c		••••••
Ő				3	6
95 S				4	2
ritle				. 5	72
ctiv				6	45
A			••••	7a	0
	b Net unrel	ated business taxable income from toright and 34.		7b	0
		O	Prior Y	ear	Current Year
	8 Contribut		6	,842,505	6,900,636
nue	9 Program			42,380	32,530
eve				58,138	20,377
Ē	11 Other rev	venue (Part VIII, column (A), lines (Gt		231,969	207,759
	12 Total reve	enue-add lines 8 through 11 (must equal Part VIII, column (A) line 12)	7	,174,992	7,161,302
	13 Grants a	nd similar amounts paid (Part IX, column (A), lines 1–3)		431,406	414,985
				0	0
səsu			1	<i>.</i>	1,390,097
Expei				180,065	267,023
ш				220.070	4 494 064
					<u>4,484,964</u> 6,557,069
				32,334	604,233
L S	19 Revenue		Beginning		End of Year
ats c					5,396,841
Asse				582,275	245,277
Let Not			4	,547,366	5,151,564
					<u> </u>
	Under pe	nalties of penury. I declare that I have examined this return, including accompanying sched	ules and state	ments, and t	o the best of my knowledge
	and belie	f, it is true, correct, and complete Declaration of preparer (other than officer) is based or	all information	of which p	reparer has any knowledge
Sig	in 🕨 🖉	Serumin (1) Report			
He		ature of officer			
	l Í	Senjamin A. Hickert. Sc			
	Туре	e or print name and title			

•

:1

Paid

V

Preparer's Use Only

Preparer's signatore

Firm's name (or yours if self-employed), address, and ZIP + 4

 Preparer's Use Only
 Firm's name (or yours if self-employed), address, and ZIP + 4
 Deloitte Tax LLP 555 12th St., NW Washington,

 May the IRS discuss this return with the preparer shown above

For Privacy Act and Paperwork Reduction Act Notice, see the sepa

Form 9	990 (2008) Page 2
Par	III Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission: This society is a civic, cultural and nonpartisan organization which, inspired by the traditional teachings of the Supreme Magisterium of the Roman Catholic Church, works in a legal and peaceful manner in the realm of ideas to defend and promote the principles of private ownership, family and perennial Christian values with their twofold function: individual and social.
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$1,666,499 including grants of \$0) (Revenue \$0) Direct Mail: America Needs Fatima was the Foundations main direct mail campaign this year. It's goal is to spread the Fatima message of prayer and conversion throughout America. This year an estimated total of 1.2 million letters were sent to current America Needs Fatima campaign members in a total of 16 mailings. As part of the direct mail outreach, 100,000 cards promoting First Saturday devotions, 80,000 Sacred Heart badges, and 100,000 copies of the book Sermons of Hope in Times of Natural Calamities were distributed free of charge. Also, 147,000 letters were sent to ANF members asking them to protest the following blasphemies: Jerry Springer: the Opera in Concert, Hamlet II, and Corpus Christi. Crusade magazine is also mailed six times a year to approximately 65,000 people. America Needs Fatima also distributed 1.8 million pictures of Our Lady of Fatima as part of its effort to enthrone Mary in Every Home.
4b	(Code:) (Expenses \$ 852,299 including grants of \$ 11,785) (Revenue \$ 45,213) Publications: The Foundation continued publishing its bi-monthly magazine, Crusade, which is sent to an average of 65,000 people. The Foundation published a new children's book titled: Pelusa: A Marvelous Tale and also published Jacinta's Story in Spanish. A total of 87,735 books related to the furtherance of the values of Christian civilization were distributed during the fiscal year. Also, the Foundation launched a website for its America Needs Fatima campaign, www.anf.org and also redesigned the TFP website and the TFP student action website. Over 1,0000 articles are published on the TFP site, and thousands of people visit these sites each month.
4c	(Code:) (Expenses \$ 620,558 including grants of \$ 13,687) (Revenue \$ 140,958) Dissemination of Ideas: Personal contact with interested individuals and organizations continues to be an important way of furthering the values of Christian civilization. This personal contact continues to be done throughout the United States. The FCC operates four offices for this purpose: in Spring Grove, PA, McLean, VA; Park Ridge, IL; and Long Beach, CA. The Foundation also distributed a total of 154,127 religious articles, including statues, rosaries, crucifixes, St. Michael medals, Consecration cards, First Saturday pledges, and devotional audio CD's. Also, 80,000 brown scapulars were spread in a effort to increase devotion to Our Lady. FCC representatives gave 1,511 presentations on the message of Our Lady at Fatima in homes, schools, and nursing homes. An estimated 16,000 people attended a Fatima presentation last year. In addition, FCC representatives contacted tens of thousands of people about the upcoming 2009 Public Square Rosary Rallies by telephone.
	Other program services. (Describe in Schedule O.) (Expenses \$ 1,928,816 including grants of \$ 380,783) (Revenue \$ 31,580)
4e	Total program service expenses ► \$ 5,068,170 (Must equal Part IX, Line 25, column (B).)

s ,

-

-

	J90 (2008)		۲	'age 3
Par	t IV Checklist of Required Schedules		×	
		n [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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	e 4	1	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	e) 5		1
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I			1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	e, 7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes, complete Schedule D, Part III.	" 8		1
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Pa X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes, complete Schedule D, Part IV"</i>			1
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D Parts VI, VII, VIII, IX, or X as applicable), . <u>11</u>	1	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	. 12	1	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	. <u>13</u> 14a		
14a b	Did the organization maintain an office, employees, or agents outside of the U.S.?	•	1	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to an organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.		1	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistanc to individuals located outside the United States? If "Yes," complete Schedule F, Part III	e 16		1
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	 ✓ 	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part I.	// <u>19</u> 20		
20 21	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		1	├
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and I	" — —		\checkmark
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more that			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to question 25.	. 24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	. 24b		┣───
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	ar 24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transactio with a disqualified person during the year? If "Yes," complete Schedule L, Part I	n . 25a		1
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualifie person from a prior year? If "Yes," complete Schedule L, Part I	d 25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	or 26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part I			1

1

.

Form 990 (2008)

Page 3

Form	990 (2008)		P	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a	\checkmark	
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	1	
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
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		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		✓
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		✓
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		1
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		✓

Form **990** (2008)

-

Form	990 (2008)		P	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	√	J
	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 72			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b_	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	·	 _✓
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a_		1
ь	If "Yes," enter the name of the foreign country: ►			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	_	;
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		-
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<u>7f</u>		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? N/A	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? N/A.	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring N/A	8		J
0	organization, have excess business holdings at any time during the year? N/A	<u> </u>		
9 a	Did the organization make any taxable distributions under section 4966? .N/A.	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter: N/A			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter: N/A			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40.	amounts due or received from them.)	120		l
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b N/A	12a		

r 5

Form **990** (2008)

- -

Form 990 (200	08) Pa	age 6
Part VI	Governance, Management, and Disclosure (Sections A, B, and C request information about policies	s not
	required by the Internal Revenue Code.)	

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		\checkmark
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		\checkmark
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		\checkmark
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		\checkmark
6	Does the organization have members or stockholders?	6	1	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	1	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7ь		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а		8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	\checkmark	
9a	Does the organization have local chapters, branches, or affiliates?	9a		 ✓
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			1
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	✓	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11	L	. ✓
Sec	tion B. Policies			

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		1
с	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	1	
13	Does the organization have a written whistleblower policy?	13	✓	
14	Does the organization have a written document retention and destruction policy?	14	✓	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
а		15a		√
b	Other officers or key employees of the organization?	15b		✓
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		1
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

List the states with which a copy of this Form 990 is required to be filed See Schedule O for the list of states. 17

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

Another's website 🗹 Upon request Own website

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Catherine E. Slobodnik, 426 Main St., Rossville, KS 66533 Tel: (785) 584-6268 20

.

.

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

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

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

Check this box if the organization did not co	mpensate	any c	offic	er, (dıre	ctor,	trus	tee, or key em	ployee.	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average hours per		<u> </u>	_	1	that ap		Reportable compensation	Reportable compensation	Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Raymond E. Drake, President and Director	1 	1		1				0	0	0
John W. Horvat, Vice-Pres. and Director		~		1				0	0	0
Luiz A. Fragelli, Director		1						54,000	0	0
Gary J. Isbell, Director		1						34,190	0	0
C. Preston Noell, III, Director		1						0	0	0
Robert E. Ritchie, Director		1						23,660	0	0
Benjamin A. Hiegert, Secretary-Treasurer				1				35,200	0	0
		-		-		· ·				
										Form 990 (2008)

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

Page 7

Part	90 (2008) VII	Section A. Officers,	Directors,	Trustees, Key		loy	ees,	an	d Hig	hest	Compensated	Employees (co	ontinue		age 8
- are		(A)		(B)	Г <u> </u>			C)			(D)	(E)	Τ	(F)	
		Name and title		Average	Posit	on (o	chec	k all	that ap	ply)	Reportable	Reportable	-	stimated	-
				hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	com f orç an	mount o other npensati rom the ganizatio id relate janizatio	ion e on ed
·····															
															_
	Total		· · · · ·				•			►	147,050	C			0
		umber of individuals (i	including th	nose in 1a) wh	no red	eive	ed r	nor	e thar	n \$1	00,000 in repo	rtable compen-	sation	from 1	the
	Jryaniz	ation > 0												Yes	No
-	.			· · ·										163	NO
		e organization list any ee on line 1a? If "Yes								oyee	e, or nignest c	ompensated	3		\checkmark
		individual listed on li	•							and	dother compe	nsation from			
		anization and related													
	individu		•••••				•						4	\vdash	✓
5	Did an service	y person listed on lir s rendered to the org	ie 1a recei anization? i	ve or accrue If "Yes," com	com olete	pen Sch	satı Iedu	on ' ile J	from I for s	any :uch	person	anization for	5		√
		Independent Contra									<u> </u>				
		ete this table for your nsation from the organ		t compensate	ed ind	lepe	ende	ent o	contra	ictor	rs that received	d more than \$1	00,00) of	
		Name	(A) and business	address							(B) Description of s	ervices	(C Compe	c) ensation	1
		ak, McClelland, Maie		adt, LLP						leg	al services			235	,508
		St., Alexandria, Virgi) ,			<u> </u>	2200	.					0.40
		wide, LLC, 36 Corda Center, Inc.	ige Park Ci	ir., Ste. 225, F	riymo	buth	1, M	ΑÜ	2360		ndraising cons	sulting		220	,846
		uscarawas Ave, 3rd I	Fl., Barber	ton, OH 4420	3					tel	emarketing fu	ndraising		151	,656
		umber of independen				in	1) v	vho	recei	•					,
		nsation from the orga					., .					,			

.

.

Form 9								Page 9
Part	t VII	Statement of Re	venue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns	1a	0				
tributions, gifts, grants other similar amounts	Ь	Membership dues		0				
aπ	С	Fundraising events	. <u>1c</u>	0				
igi İlar	d	Related organizations	<u>1d</u>	0				
sins,	е	Government grants (contr	ibutions). 1e	0				
utio	f	All other contributions, gifts, g	grants,					
đ		and similar amounts not inclu		<u>6,900,636</u>				
Contributions, and other simi		Noncash contributions include Total. Add lines 1a-1f	· •		6,900,636			
		Total. Adu lines la-11		Business Code	0,500,030			l
enue		Sales of Prints and C	alendars	511190	732	732	0	0
teve	2a b	Seminar Registration		900099	31,580	31,580	0	0
Ce I		Commissions web re		900099	218	218	0	0
eri	d		•••••				-	
ς Ε								
Program Service Revenue	f	All other program servi						
Pro	g	Total. Add lines 2a-2f	<u> </u>	🕨	32,530			
	3	Investment income (inc	luding dividends	, interest, and				
		other similar amounts)		🕨	20,915	0	0	20,915
	4	Income from investment of			0	0	0	0
	5	Royalties			0	0	0	0
			(i) Real	(ii) Personal	,		»	
		Gross Rents	<u>50</u>	0	~			
	1	Less: rental expenses	50	0		*		
		Rental income or (loss) Net rental income or (lo			50	0	0	50
			(i) Securities	(ii) Other		-		
	/a	Gross amount from sales of assets other than inventory	380	14,118				
	Ь	Less: cost or other basis						
		and sales expenses .	376	6,660				
	c	Gain or (loss)	4	7,458				
	d	Net gain or (loss)		<u></u> ►	7,462	0	0	7,462
Other Revenue	8a	Gross income from events (not including \$ of contributions reporte See Part IV, line 18.	d on line 1c).	0				
the		Less: direct expenses		0				
0	c	Net income or (loss) fro	om fundraising e	vents 🕨	0	0	0	0
		Gross income from game See Part IV, line 19	a	0		-		
		Less: direct expenses, Net income or (loss) fro		0 ities ►	0	0	0	0
								<u> </u>
		Gross sales of inver- returns and allowances Less: cost of goods so	ь а	192,724 140,894				
		Net income or (loss) from			51,831	51,831	0	0
		Miscellaneous Rev		Business Code				
	11a	Rent Mail List to 5010	:3 org.	532000	144,853	0	0	144,853
	b	Masia and Ladaina		900099	1,680	0	0	1,680
	c	Credit Card Rewards		900099	750	0	0	750
	d	All other revenue		900099	595	0	0	595
	e	Total. Add lines 11a-1	1d	🕨	155,878			
	12	Total Revenue. Add In					_	
	<u> </u>	9c, 10c, and 11e	<u> </u>	🕨	7,161,302	84,360	0	208,835

_ ___

_ _

· .

-

Form 990 (2008)

- -

• •

	All other organizations must complete colu		Lieguneu to como), anu (D).
	o not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	219,505	219,505		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	225	225		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	195,255	195,255 0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	148,970	120,683	14,448	13,839
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and	206,984	167,912	19,879	
	persons described in section 4958(c)(3)(B)	907,952	737,471	86,024	84,456
7 8	Other salaries and wages	0	0	0	0
9	Other employee benefits	0	0	0	0
10		126,192	102,646	11,864	11,682
11	Fees for services (non-employees):				
a		0	0	0	0
b		76,778	76,653	43	83
с	• · · · · · · · · · · · · · · · · · · ·	33,771	0	33,771	0
d		0	0	0	0
е	Professional fundraising services. See Part IV, line 17	267,023			267,023
f	Investment management fees	0	0	0	0
g	Other	28,015	26,625	0	1,390
12	Advertising and promotion	7,176	5,625	1,022	528
13	Office expenses	192,125	159,567	8,541	24,018
14	Information technology	43,495	35,356	3,715	4,424
15	Royalties	0	0	0	0
16	Occupancy	359,878	315,579	18,005	26,293
17		335,172	306,158	15,520	13,494
18	Payments of travel or entertainment expenses	o	0	o	0
10	for any federal, state, or local public officials	45,408	45,408	0	0
19 20	Conferences, conventions, and meetings	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	210,961	177,902	16,195	16,865
23	Insurance	41,983	16,881	24,804	298
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	Printing Expenses	1,158,002	919,558	380	238,062
b	Postage and Shipping	962,170	683,944	2,488	275,738
c	Mass Mailing Services	563,943	457,723	0	106,221
d	Consumables	147,813	131,240	5,577	10,997
е	Bank Fees	86,011	16,646	388	68,977
f	All other expenses Misc. Expenses	192,263	149,607	17,272	25,384
25	Total functional expenses. Add lines 1 through 24f	6,557,069	5,068,170	279,935	1,208,964
26	Joint Costs. Check here ► 🗹 if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	2,181,048	1,929,182	0	251,867

Form **990** (2008)

-

Form 990 (2008)

• •

		(A)		(B)
<u> </u>		Beginning of year		End of year
1	Cash-non-interest-bearing	89,908	1	40,32
2	Savings and temporary cash investments	1,266,060	2	1,715,68
3	Pledges and grants receivable, net	0	3	
4	Accounts receivable, net	15,453	_4	28,21
5	Receivables from current and former officers, directors, trustees, key			
	employees, or other related parties. Complete Part II of Schedule L .	831	5	
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
	Part II of Schedule L	220	6	6
7	Notes and loans receivable, net	0	7	
8	Inventories for sale or use	450,680	8	477,4/
9	Prepaid expenses and deferred charges	298,104	9	232,15
10a	Land, buildings, and equipment: cost basis 10a 2,925,480			
Ь	Less: accumulated depreciation. Complete			
	Part VI of Schedule D 10b (1,175,995)	1,868,802	10c	1,749,48
11	Investments—publicly traded securities	0	11	
12	Investments—other securities. See Part IV, line 11	0	12	
13	Investments—program-related. See Part IV, line 11	0	13	
14	Intangible assets	0	14	· · ·
15	Other assets. See Part IV, line 11	1,139,584	15	1,152,5
16	Total assets. Add lines 1 through 15 (must equal line 34)	5,129,641		5,396,8
17	Accounts payable and accrued expenses			167,8
18	Grants payable		18	
19			-	
			20	
20	Tax-exempt bond liabilities		21	
21	Escrow account liability. Complete Part IV of Schedule D	U	21	
22	Payables to current and former officers, directors, trustees, key			
	employees, highest compensated employees, and disqualified -	0	22	
	persons. Complete Part II of Schedule L	146,609		27.4
23	Secured mortgages and notes payable to unrelated third parties	140,009		37,1
24	Unsecured notes and loans payable	39,440	24	
25	Other liabilities. Complete Part X of Schedule D			40,3
26	Total liabilities. Add lines 17 through 25	582,275	26	245,2
	Organizations that follow SFAS 117, check here \blacktriangleright \square and complete lines 27 through 29, and lines 33 and 34.			
27		7,357,845	27	10,595,4
28	Temporarily restricted net assets	(2,810,479)	28	(5,438,90
29	Permanently restricted net assets	0	29	· · · · ·
23	Organizations that do not follow SFAS 117, check here \blacktriangleright		-	
	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	4,547,366	33	5,151,5
34	Total liabilities and net assets/fund balances	5,129,641	34	5,396,8
art XI		-,		.,,.

			Yes	NO
1	Accounting method used to prepare the Form 990: 🛛 Cash 🛛 Accrual 📋 Other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	\checkmark	
	Were the organization's financial statements audited by an independent accountant?	2b	✓	
	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	1	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a_		
b	If "Yes," did the organization undergo the required audit or audits?	3b		
_		_		

Form 990 (2008)

-

SCHEDULE A

.

(Form 990 or 990-EZ)

.

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

	OMB No 1545-0047					
	2008					
	Open to Public Inspection					
eni	entification number					

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.								Inspection			
		the organization	1						Employe	er identifica	tion number
The	Fo	undation for	a Christian Civi	lization, Inc.					23	7	7325778
Par	rt I	Reasor	for Public Ch	arity Status (All or	ganizatio	ons mus	t comple	ete this	part.) (se	e instru	ctions)
The 1 2 3 4	 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 										
5		An organiza		the benefit of a colle			wned or a	operated	by a gov	ernmenta	I unit described in
6				ernment or governme	ental unit	describe	d in sect	ion 170(t	o)(1)(A)(v).	
7	_	described in	section 170(b)	receives a substantia (1)(A)(vi). (Complete P	Part II.)			governm	nental uni	it or from	the general public
8 9		An organizative receipts from support from	tion that normally m activities relate m gross investm	d in section 170(b)(1) y receives: (1) more that ed to its exempt funct ent income and unre a after June 30, 1975.	an 33½ % tions—su lated bus	of its subject to c siness tax	pport froi certain ex xable inc	ceptions ome (les	s, and (2) s sectior	no more	than 331/3 % of its
10 11		An organiza purposes of 509(a)(3). C	tion organized a one or more pu heck the box tha	nd operated exclusive and operated exclusive blicly supported organ at describes the type	vely for th nizations of suppo	ne benefi described rting orga	t of, to p d in secti anization	perform t on 509(a) and com	he functi)(1) or sei iplete line	ons of, o ction 509 es 11e thi	r to carry out the (a)(2). See section rough 11h.
e		persons oth	g this box, I cer	tify that the organizat	tion is no		led direc	tly or inc	directly b	y one or	
f g		organization	n, check this box	a written determinati							III supporting
			n who directly o	r indirectly controls, e				th persor	ns descril	bed in (II)	Yes No 11g(i)
		(ii) A family (iii) A 35% o	member of a pe	erson described in (i) a of a person described	above? d in (i) or	(II) above	· · ? · ·	· · · ·	· · · ·	· · · ·	11g(ii) 11g(iii)
<u>h</u>			T	ation about the organ		¥			4.2	la tha	And American
(1)		e of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	ribed on lines 1–9 in col (i) listed in your the organization ve or IRC section governing document? the organization col (i) of your		of your	organizat (i) organi	ls the tion in col zed in the S ?	(vii) Amount of support	
					· Yes	No	Yes	No	Yes	No	
											· · · · · · · · · · · · · · · · · · ·
							L	L		ļ	
				· · · · · · · · · · · · · · · · · · ·							
		····	l	<u></u>				<u> </u>			
Tota	al										

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2008

· ,

_

Page **2**

Ca							
	lendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,420,237	6,083,951	6,416,310	7,194,660	6,900,636	31,015,794
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	
4	Total. Add lines 1-3	4,420,237	6,083,951	6,416,310	7,194,660	6,900,636	31,015,794
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	~ ~				~ ~	1,235,386
6	shown on line 11, column (f)						29,780,408
<u>6</u> Sec	tion B. Total Support	I		ł			25,700,400
	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4	4,420,237	6,083,951	6,416,310	7,194,735	6,900,636	31,015,869
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	10,471	28,119	58,874	56,523	20,965	174,952
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	0
11	Total support. Add lines 7 through 10 .					1	31,190,821
12	Gross receipts from related activities, etc	•				12	1,414,630
$\frac{13}{500}$	First five years. If the Form 990 is for organization, check this box and stop he tion C. Computation of Public Su	ere		d, third, fourth,			
14	Public support percentage for 2008 (line					14	95.48 %
15	Public support percentage for 2000 (intel Public support percentage from 2007 Sci		-			15	98.75 %
16a		zation did not c	heck the box o	on line 13, and I	ine 14 is 331/3 9	6 or more, cheo	k this box
b	331/3 % support test-2007. If the organization qua	zation did not c	heck a box on	line 13 or 16a,	and line 15 is 3	331/3 % or more,	check this
17a	10%-facts-and-circumstances test – 20 more; and if the organization meets the "facts-and-circum	acts-and-circun	nstances" test,	check this box a	and stop here.	Explain in Part	IV how the
				ck a box on line			

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

Schedule A (Form 990 or 990-EZ) 2008

- -

Schedule A (Form 990 or 990-EZ) 2008

-	t III Support Schedule for Orga	-izetiene De	antibod in C	Conting 500/a	1(0)		Page 3
Pal	t III Support Schedule for Orga (Complete only if you checked)(2)		
Sec	tion A. Public Support						
Ca	llendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization'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 1-5		· · · · · · · · · · · · · · · · · · ·				
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
-	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)]
Sec	tion B. Total Support						
Ca	alendar year (or fiscal year beginning ın) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	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 IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12)		I				<u> </u>
14	First five years. If the Form 990 is for organization, check this box and stop	here	<u></u>	nd, third, fourth			
Sec	tion C. Computation of Public Su	pport Perce	ntage			·····	
15 16	Public support percentage for 2008 (In Public support percentage from 2007	Schedule A, P	art IV-A, line 2			15 16	%
Sec	tion D. Computation of Investme	nt Income P	ercentage			<u></u>	
17	Investment income percentage for 200	8 (line 10c, co	lumn (f) divide	d by line 13, c	olumn (f)) .	17	%
18	Investment income percentage from 20	007 Schedule	A, Part IV-A, II	ne 27h		18	%
19a	33% % support tests – 2008. If the org 17 is not more than 33% %, check this b						
b	33% % support tests – 2007. If the organ line 18 is not more than 33% %, check thi	nization did not	check a box o	n line 14 or line	19a, and line	16 is more than	331/3 %, and
20	Brivate foundation If the organization		-	-			

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions > 20

Page 3

Schedule A	(ronn	990 OI	990-EZ)	20

.

	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)
<u> </u>	Part II, line 17a or 17b, or Part II, line 12. Fronde any other additional mornation. (see instructions)
	, ,
·	
••••	
····	

• ,

SCHEDULE C

(Form 990 or 990-EZ)

.

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527



Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-EZ.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations. Complete Parts I-A and B. Do not complete Part I-C

- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

• Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A. If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Nar	me of organization			Employ	er identification number
1	e Foundation for a Christi			23	7325778
Pa		ed by all organizations exemptions for Schedule C for details.		n 501(c) and sectior	n 527 organizations.
1	Provide a description of t	he organization's direct and indired	t political campai	gn activities in Part IV.	
2	Political expenditures .				
3	Volunteer hours				
Pa		ted by all organizations exem tions for Schedule C for details		n 501(c)(3).	
1	Enter the amount of any e	excise tax incurred by the organiza	tion under sectior	n 4955 🕨 💲	
2		excise tax incurred by organization			
3		d a section 4955 tax, did it file For			
	If "Yes," describe in Part	· · · · · · · · · · · · · · · · · · ·			· · L Yes L No
1	rt I-C To be complet	ted by all organizations exem tions for Schedule C for details		n 501(c), except se	ction 501(c)(3).
1		expended by the filing organization	on for section 527		
2		ling organization's funds contribute			•••••
-	527 exempt function activ	vities		 \$_	
3		t exempt function expenditures. A			
4		file Form 1120-POL for this year?			
5		s and employer identification numbe			
•		ount paid and indicate if the amour			
		promptly and directly delivered to a s	• •	•	eparate segregated fund
	or a political action commit	tee (PAC). If additional space is need	ded, provide inform	nation in Part IV.	T
-	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-

Sch	edule C (Form 990 or 990-EZ) 2008			Page 2
Pa		nizations exempt under section 501(c)(3) t 01(h)). See the instructions for Schedule C fo		768
A B	Check \blacktriangleright if the filing organization Check \blacktriangleright if the filing organization	belongs to an affiliated group. checked box A and "limited control" provision	ons apply.	
	Limits on Lob (The term "expenditures" m	(a) Filing organization's totals	(b) Affiliated group totals	
1:	a Total lobbying expenditures to influenc	e public opinion (grass roots lobbying)	0	0
	b Total lobbying expenditures to influenc	e a legislative body (direct lobbying)	589	0
	c Total lobbying expenditures (add lines	1a and 1b)	589	0
	d Other exempt purpose expenditures	6,421,009	0	
	e Total exempt purpose expenditures (ac	6,421,598	0	
	f Lobbying nontaxable amount. Enter the columns	471,050	471,050	
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000		{ ×
	g Grassroots nontaxable amount (enter 2	5% of line 1f)	117,763	0
I	h Subtract line 1g from line 1a. Enter -0-	if line g is more than line a	0	0
	i Subtract line 1f from line 1c. Enter -0-	If line f is more than line c	0	0
	j If there is an amount other than zero on section 4911 tax for this year?	either line 1h or line 1i, did the organization file Fo	rm 4720 reporting	🗌 Yes 🗌 No

.

.

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period										
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total					
2a Lobbying non-taxable amount	422,607	450,508	504,991	471,050	1,849,157					
b Lobbying ceiling amount (150% of line 2a, column(e))					2,773,736					
c Total lobbying expenditures	944	3,659	2,024	589	7,216					
d Grassroots non-taxable amount	105,652	112,627	126,248	117,763	462,289					
 Grassroots ceiling amount (150% of line 2d, column (e)) 					693,434					
f Grassroots lobbying expenditures	944	3,659	2,024	- 0	6,627					

Schedule C (Form 990 or 990-EZ) 2008

Schedule C (Form 990 or 990-EZ) 2008

.

.

Page 3

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

				(b)		
		Yes	No	A	mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of:					
a	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			·····		·J
C L	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					_
9 h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?					
i	Other activities? If "Yes," describe in Part IV					
i	Total lines 1c through 1i					
, 2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A To be completed by all organizations exempt under section 501(c)(4), sec	tion	501(c	:)(5), a	r	
	section 501(c)(6). See the instructions for Schedule C for details.				Yes	No
				1	163	
1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	• •	•	2		
3	Did the organization make only include lobbying expenditures of \$2,000 or less?	• •	•	3		
_	t III-B To be completed by all organizations exempt under section 501(c)(4), sec	tion	501(d	_	ـــــــــــــــــــــــــــــــــــــ	
	section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" question 3 is answered "Yes." See Schedule C instructions for details.					
			1	<u></u>		
1	Dues, assessments and similar amounts from members	•				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amount: political expenses for which the section 527(f) tax was paid).	s ot				
~			2a			
a b	Current year	•	2b			<u> </u>
c	Carryover from last year	•	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	•	3			<u>.</u>
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of	the				
•	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb					
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)		5			
Pa	t IV Supplemental Information	_				
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, I	ine 5;	and	Part II-	B, line	e 1i.
Also	, complete this part for any additional information.					
••••			•••••		·····	•••••
			•••••			•••••
			•••••			
					-	
						•••••

Schedule C (For	orm 990 or 990-EZ) 2008	Page 4
Part IV	Supplemental Information (continued)	
•••••		
		•••••
••••••		
		••••••
		_
•••••		
		••••••

· .

Supplemental Financial Statements

· •

SCHEDULE D (Form 990)		Supplemental Financial Statements							OMB No 1545-0047		
									3		
	ment of the Treasury Revenue Service		o Form 990. To be complete fes," to Form 990, Part IV, lin		Open to Public Inspection						
Name	of the organization				Emp	loyer idei	ntification i	number			
The		a Christian Civilization, In			23	<u> </u>	7325				
Par			nor Advised Funds or (" to Form 990, Part IV, I		unds o	r Acco	ounts. C	omplet	e if		
		<u>.,</u>	(a) Donor advised fi		(b)	Funds ar	nd other ac	counts			
1	Total number at	end of year									
2	Aggregate contr	ributions to (during year)		·							
3		ts from (during year) .									
4		e at end of year	· · · · · · · · · · · · · · · · · · ·								
5	funds are the o	rganization's property, sub	donor advisors in writing t ject to the organization's e	xclusive legal cont	rol?		. L	Yes [] No		
6		naritable purposes and not	onors, and donor advisors for the benefit of the dono	or or donor advisor	r or oth		be	Yes [No		
Par			plete if the organization a			 990. Pa	art IV. lin				
1			d by the organization (chec								
•	_ • • • •	of land for public use (e.g	· · ·	Preservation Preservation		•	<i>,</i> ,		area		
2		2a-2d if the organization he	d a qualified conservation c	contribution in the fe	orm of a	conser	vation ea	sement	:		
	on the last day	or the tax year.			[н	eld at the	End of ti	ne Year		
а	Total number of	conservation easements.				<u>2a</u>					
Ь	-	•	asements			<u>2b</u>					
С			certified historic structure in			2c 2d		<u> </u>			
d			led in (c) acquired after 8/1								
3	the taxable yea	r 🕨	ied, transferred, released, e				e organiz	ation d	uring		
4			to conservation easement								
5	enforcement of	the conservation easement					. L	Yes [
6 7			oring, inspecting, and enfor g, inspecting, and enforcin								
8			d on line 2(d) above satisfy	-			·				
	170(h)(4)(B)(ı) ar	d section 170(h)(4)(B)(ii)?						Yes [
9	balance sheet, the organization	and include, if applicable, is accounting for conservation		the organization's	financia	l stater	nents tha				
Par			ections of Art, Historica wered "Yes" to Form 990		Other S	imilar	Assets.				
1a	art, historical tre	asures, or other similar ass	nder SFAS 116, not to repo ets held for public exhibition te to its financial statemen	n, education, or res	search II	n furthe	balance s rance of p	heet wo	orks of ervice,		
b	historical treasu provide the follo	res, or other similar assets owing amounts relating to		education, or rese	earch in	further	ance of p	oublic s	ervice,		
	(iii) Assets inclu	ded in Form 990. Part X	/III, line 1		•		. \$				
2	If the organizat	ion received or held works	of art, historical treasures under SFAS 116 relating t	s, or other similar							
a b	Revenues inclu	ded in Form 990, Part VIII,					\$ \$	•••••			
5				•••••	• •						

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No. 52283D Schedule D (Form 990) 2008

Cart III Organizations Maintaining Collections of Art, Historical Treasures, or Other similar Assets (continued) 3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply): a Public exhibition b bchecking research c c preservation for future generations d bchecking research c c preservation for future generations c context preservation for future generations c context preservation for future generations c context preservation for future generations context preservation for future generations and explain how they further the organization's exempt purpose in Part XV. Dung the year, ddt the organization solid or receive donations of art, historical treasures, or other similar assets to the reservation for future generation to be anantaned as part of the organization's collections or ther sense on the preservation's collection for server preservation's collection for future generation for the treast continuet on the preservation's collection for server preserver the following table: Cart V Treast, Scrow and Custodial Arrangementer. Complete the following table: a b thtreserver explain the arrangement in Part XIV.<	Sched	ule D (Form 990) 2008		_		_						e 2
impublic exhibition d Loan or exchange programs b Scholarly research e Other Other c Provide a description of the urganization's collections and explain how they lurther the organization's exempt purpose in Part XV. Provide a description of the organization answered "Yes" to Form 990. Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990. Part IV. Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990. Part IV. Trust, Escrow and Custodial Arrangements. Complete the following table: 1 Is the organization an agent, truste, custodian or other intermediary for contributions or other assets not included on Form 990. Part X? 1 Is the organization an agent, truste, custodian or other intermediary for contributions or other assets not include on Form 990. Part X? 2 Boginning balance 1c 4 Additions during the year. 1d 2 Did the organization include an amount on Form 990. Part X, line 217 Yes in No 4 Interves," explain the arrangement PAX. Interves," explain the arrangement PAX. Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. 2 Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. </td <td>Par</td> <td>t III Organizations Maintaini</td> <td>ng Col</td> <td>lections</td> <td>of Art, H</td> <td>istorica</td> <td>al Treasure</td> <td>s, or C</td> <td>Other Similar A</td> <td>ssets (co</td> <td>ontinue</td> <td>:d)</td>	Par	t III Organizations Maintaini	ng Col	lections	of Art, H	istorica	al Treasure	s, or C	Other Similar A	ssets (co	ontinue	:d)
b Scholarly research e Other c Preservation for future generations e Other Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XV. 5 During the year, did the organization solicit or receive donations of art, histonical treasures, or other similar assets to be sold to raise funds rather than to be maintaned as part of the organization an algorit, trustles, corve and Custodial Arrangements. Complete if organization an answerd "Yes" to Form 990, Part X, line 91. 1a Is the organization an agent, trustles, custodian or other intermediary for contributions or other assets not included on Form 90, Part X, Vand complete the following table: Amount c Beginning balance 1d Amount d Additions during the year 1d Id a Did for organization include an amount on Form 990, Part X, line 21? Ives No b If "Yes," explain the arrangement in Part XIV. If and the organization include an amount on Form 990, Part X, line 21? Ives No b If "Yes," explain the arrangement in Part XIV. If and the organization include an amount on Form 990, Part X, line 21? Ives No d Controbutions Inter organization includes an amount on Form 990, Part X, line 10. Intestheorganizations	3		and oth	er record	s, check	any of t	he following	that a	re a significant	use of its	collect	ion
b Scholarly research e Other c Preservation for future generations e Other Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XV. 5 During the year, did the organization solicit or receive donations of art, histonical treasures, or other similar assets to be sold to raise funds rather than to be maintaned as part of the organization an algorit, trustles, corve and Custodial Arrangements. Complete if organization an answerd "Yes" to Form 990, Part X, line 91. 1a Is the organization an agent, trustles, custodian or other intermediary for contributions or other assets not included on Form 90, Part X, Vand complete the following table: Amount c Beginning balance 1d Amount d Additions during the year 1d Id a Did for organization include an amount on Form 990, Part X, line 21? Ives No b If "Yes," explain the arrangement in Part XIV. If and the organization include an amount on Form 990, Part X, line 21? Ives No b If "Yes," explain the arrangement in Part XIV. If and the organization include an amount on Form 990, Part X, line 21? Ives No d Controbutions Inter organization includes an amount on Form 990, Part X, line 10. Intestheorganizations	а	<u> </u>			d	Π.	oan or exch	ange p	programs			
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization scolect or receive donations of art, historical treasures, or other similar assets to be sold to race with the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Intermediate the following table: c Beginning balance 1d Intermediate the reganization include an amount on Form 990, Part X, line 21. a Did the organization include an amount on Form 990, Part X, line 21. Intermediate treation include an amount on Form 990, Part X, line 21. a Did the organization include an amount on Form 990, Part X, line 21. Intermediate treation include an amount on Form 990, Part X, line 21. a Did the organization include an amount on Form 990, Part X, line 21. Intermediate treation include an amount on Form 990, Part X, line 21. a Beginning of year balance Intermediate treation answered "Yes" to Form 990, Part IV, line 10. a Beginning of year balance Intermediate treation answered "Yes" to Form 990, Part IV, line 10. a Beginning of year balance Intermediate treation	Ь				е							
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maritaned as part of the organization answered "Yes" to Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a Is the organization include an amount on Form 990, Part X, line 21. 1a Is the organization include an amount on Form 990, Part X, line 21. 1b T'res," explain the arrangement in Part XIV and complete the following table: 1c Amount 1d Ending balance 1d Include on Form 990, Part X, line 21? 2n Oth the organization include an amount on Form 990, Part X, line 21? 2n During mark the arrangement in Part XIV. 2n Other organization include an amount on Form 990, Part X, line 21? 2n During table. 2n Provide the estimated procentage of the Yation answered "Yes" to Form 990, Part IV, line 10. 2n Contributions 3n Arrans or scholarships 4 Grants or scholarships <t< td=""><td>C</td><td></td><td>ions</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	C		ions									
assets to be sold to raise funds rather than to be maintaned as part of the organization's collection?	4	Provide a description of the organiz		collection	s and exp	olain hov	w they furthe	er the c	rganization's ex	empt pur	pose in	1
Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ives No b If "Yes," explain the arrangement in Part XIV and complete the following table: Ives No c Beginning balance 1c Ives Amount d Additions during the year 1d Ives Ives No b If "Yes," explain the arrangement in Part XIV Ives Ives No Ives No d Integration include an amount on Form 990, Part X, line 21? 1d Ives No Ives No b If "Yes," explain the arrangement in Part XIV Part X Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. Ives Ives No b If "ves," explain the arrangement in Part XIV Ives Ives Ives Ives No a Beginning of year balance . (a) Current year (b) Pror year (c) Twe years back (d) Four years back Ives Ive	5	assets to be sold to raise funds rathe	r than to	be mainta	ained as p	part of th	e organizatio	n's col	ection?			No_
Included on Form 990, Part X? Image: Second Se	Par	t IV Trust, Escrow and Cust Part IV, line 9, or reported	odial A d an am	rrangem	ents. Col Form 99(mplete), Part)	if organizati X, line 21.	on ans	wered "Yes" to	o Form 9	90,	
c Beginning balance 1c d Additions during the year 1d e Distributions during the year 1d f Ending balance 1f d Did the organization include an amount on Form 990, Part X, line 21? If a Did the organization include an amount on Form 990, Part X, line 21? If e Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (c) Prov years back (d) For years back b Contributions (d) Current year (e) Prov years back (e) For years back a Beginning of year balance . (d) Current year (e) Por years back (e) For years back a Contributions (d) Current year (e) Prov years back (e) For years back a Contributions (d) Current year (e) Prov years back (e) For years back a Controbutions (e) Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ % B Port of ganizations % Go		Included on Form 990, Part X?										
c Beginning balance 1c d Additions during the year 1d e Distrubutions during the year 1d 2a Did the organization include an amount on Form 990, Part X, line 21? 1e 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No b ft "Yes," explain the arrangement in Part XW. Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Pror year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (a) Current year (b) Pror year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (a) Current year (b) Pror year (c) Two years back (d) Three years back (e) Four years back 1a Grants or scholarships (a) Current year (b) Pror year (a) Current year (b) Pror year (c) Two years back (d) Three years back (e) Four years back 2 Cher expenditures for facilities (a) Current year (b) Pror year (c) Chere wependitures <	b	If "Yes," explain the arrangement in	Part XI	V and cor	mplete the	e followi	ing table:					
a dditions during the year id e Distributions during the year ie f Ending balance if a Did the organization include an amount on Form 990, Part X, line 21? if a Did the organization include an amount on Form 990, Part X, line 21? if b the organization include an amount on Form 990, Part X, line 21? if b the organization include an amount on Form 990, Part X, line 21? if b the organization include an amount on Form 990, Part X, line 21? if b the organization include an amount on Form 990, Part X, line 10. if Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. i a Beginning of year balance if c Investment earnings or losses if d Grants or scholarships if e Other expenditures for facilities and programs if a dord designated or quasi-endowment ▶ % b Permanent endowment ▶ % b Permanent endowment ▶ % 3 Are there endowment ▶ % 3a Are there endowment ▶ if if if elated organizations if adit) if if elated organizations if adit)									-	Amount		
a Distributions during the year . 1e f Ending balance . 1f 2a Did the organization include an amount on Form 990, Part X, line 21? 1 the 2b Did Yes," explain the arrangement in Part XIV. Ford Term 990, Part IV, line 10. Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance . (a) Current year (b) Provyear (c) Two years back (d) Three years back (d) Four years back (d) Three years back (d) Four years back (d) Three years back (d) Four years back (d) Three years back (d) Three years back (d) Three years back (d) Four years back (e) Four years back (d) Three years back (f) Three years back (d) Three years back (f) Three years back (d) Three years back (f) Three years back (f) Four years (f) Cost or t								• •				
f Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No b If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, Inne 10. (a) Current year (b) Pror year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance								·				
2a Did the organization include an amount on Form 990, Part X, line 21? □ Yes □ No b If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. i Beginning of year balance	е											
b If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance	f							. 🛄				
Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. a Beginning of year balance	2a b	Did the organization include an ame If "Yes." explain the arrangement in	ount on Part XI	Form 990 V.), Part X,	line 21?	,	• •			∋s ∟i I	No
(a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance					zation ai	nswere	d "Yes" to	Form	990, Part IV, I	ne 10.		
b Contributions	-		· ·	v	1		1				r years ba	ick
b Contributions	12	Beginning of year balance										
c Investment earnings or losses	Ъ	• • •										
d Grants or scholarships												
e Other expenditures for facilities and programs		0							; ,			$\overline{\mathbf{A}}$
and programs												
g End of year balance		and programs										
a Board designated or quasi-endowment ▶												
b Permanent endowment ▶% c Term endowment ▶% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	2		-			d as:						
c Term endowment	а	Board designated or quasi-endown	nent 🏲 -	•••••	%							
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No (i) unrelated organizations 3a(i) 3	b	Permanent endowment >	%									
organization by: Yes No (i) unrelated organizations 3a(i) 3a(i) (ii) related organizations 3a(ii) 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 3b 4 Describe in Part XIV the intended uses of the organization's endowment funds. 3b 3b 3b Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. (c) Depreciation (d) Book value 1a Land 0 437,988 4337,988 b Buildings 0 1,244,544 366,254 878,290 c Leasehold improvements 0 0 0 0 0 d Equipment 0 1,242,948 809,741 433,207 e Other 0 0 0 0	С	Term endowment ►%	6									
(i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments – Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (ther) (b) Cost or other basis (ther) (c) Depreciation 1a Land 0 437,988 b Buildings 0 1,244,544 366,254 c Leasehold improvements 0 0 0 0 0 0 0 d Equipment 0 1,242,948 809,741 e Other 0 0 0	3a		e posse	ession of t	he organiz	zation th	at are held a	nd adn	ninistered for the	,	Yes	No
(i) Unrelated organizations 3a(ii) (ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Depreciation 1a Land 0 437,988 437,988 b Buildings 0 1,244,544 366,254 878,290 c Leasehold improvements 0 0 0 0 d Equipment 0 1,242,948 809,741 433,207 e Other 0 0 0 0		v								3a(i)		<u> </u>
Investige of part view of a state of the organizations listed as required on Schedule R? 3b 4 Describe in Part XIV the intended uses of the organization's endowment funds. 3b Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Depreciation 1a Land 0 437,988 b Buildings 0 1,244,544 366,254 c Leasehold improvements 0 0 0 d Equipment 0 1,242,948 809,741 e Other 0 0 0		-	•••		• • •	• • •	· · · ·	• •				
4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Depreciation 1a Land 0 437,988 437,988 b Buildings 0 1,244,544 366,254 878,290 c Leasehold improvements 0 0 0 0 d Equipment 0 1,242,948 809,741 433,207 e Other 0 0 0 0	h							· ·				<u> </u>
Part VIInvestments – Land, Buildings, and Equipment. See Form 990, Part X, line 10.Description of investment(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Depreciation(d) Book value1aLand0437,988437,988bBuildings01,244,544366,254878,290cLeasehold improvements0000dEquipment01,242,948809,741433,207eOther0000										00	I	
Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Depreciation (d) Book value 1a Land . . 0 437,988 437,988 b Buildings . . 0 1,244,544 366,254 878,290 c Leasehold improvements . . 0 0 0 0 d Equipment . . 0 1,242,948 809,741 433,207 e Other . . 0 0 0 0								Part X	line 10			
b Buildings 0 1,244,544 366,254 878,290 c Leasehold improvements 0 0 0 0 0 d Equipment 0 1,242,948 809,741 433,207 e Other 0 0 0 0				a) Cost or o	ther basis	(b) Co	ost or other			(d) Boo	k value	
b Buildings 0 1,244,544 366,254 878,290 c Leasehold improvements 0 0 0 0 0 d Equipment 0 1,242,948 809,741 433,207 e Other 0 0 0 0		Lond		n		4	37.988			437	.988	
o o o o o o c Leasehold improvements . . o o o o d Equipment . . o 1,242,948 809,741 433,207 e Other o o o o o o			· ·						366.254		•	
C Leasenoid improvements .		-	· · -			- ,,-		·			<u></u>	
e Other		•	· · -			1 :						
			· · -			,-						
			equal Fo		art X. colui	mn (B). li						85

· .

Schedule D (Form 990) 2008

. .

Schedule D (Form 990) 2008			Page
Part VII Investments—Other Securitie	s. See Form 990, Part X	, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year m	
Financial derivatives and other financial products			
Closely-held equity interests			<u></u>
Other			
	-		· · · · · · · · · · · · · · · · · · ·
		· ·	
	-		
		· · · · · · · · · · · · · · · · · · ·	
	-		_ ,
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		l	
Part VIII Investments—Program Relate		1	
(a) Description of investment type	(b) Book value	(c) Method of val Cost or end-of-year m	
		· · · · · · · · · · · · · · · · · · ·	
			·····
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, P			
	(a) Description		(b) Book value
Works of Art			36,566
Land Improvements (less depreciation)			196,128
Building Improvements (less depreciation)			874,200
Asbestos Removal from Buildings			37,200
Amount due from supplier for delivery of brol	ken inventory		5,810
Advances to Employees and Volunteers			2,489
Investment in Precious Metals at Market Valu	e	· · · · · · · · · · · · · · · · · · ·	103
· · · · · · · · · · · · · · · · · · ·			·
Total. (Column (b) should equal Form 990, Part X, co	ol (B) line 15.)	>	1,152,557
Part X Other Liabilities. See Form 990		· · · · · · · · · · · · · · ·	1,102,007
(a) Description of liability	(b) Amount		
Federal income taxes		0	
Asbestos Removal from Buildings	37,20		
Sales Tax Owed	3,11		
		~ 1	

.

.

 Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ►
 40,317

 In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Schedule D (Form 990) 2008

Schee	lule D (Form 990) 2008		Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statement	s	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	7,161,302
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,557,069
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	604,233
4	Net unrealized gains (losses) on investments	4	(45)
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV)	8	0
9	Total adjustments (net). Add lines 4-8	9	(45)
<u>10</u>	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	604,188
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	1	
1	Total revenue, gains, and other support per audited financial statements	1	7,302,698
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	-	
b	Donated services and use of facilities	-	
С	Recoveries of pnor year grants	-	
d	Other (Describe in Part XIV)	<u>_</u>	
е	Add lines 2a through 2d	2e	(45)
3	Subtract line 2e from line 1	3	7,302,734
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a (-	
b	Other (Describe in Part XIV)		(4.4.4.4.2.0)
с 5	Add lines 4a and 4b	4c	(141,432)
_	t XIII Reconciliation of Expenses per Audited Financial Statements With Expense		7,161,302
		1	6,698,510
1	Total expenses and losses per audited financial statements	-	0,000,010
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a		4	
b		-	
C		4	
d		2e	(141,442)
e	Add lines 2a through 2d	3	6,557,068
3	Subtract line 2e from line 1		0,001,000
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	investment expenses not included on Form 990, Part Vin, line 70		
D	Other (Describe in Part XIV)	4c	- 0
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	6.557.068
Pa	t XIV Supplemental Information	-	
and 	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. 		
Bro	oker Fees.		
Pa	t XIII, Line 2d: Cost of Goods Sold, Inventory Lost from Shrinkage, Loss on Sales Other than	Inve	ntory, Investment
Bro	oker Fees.		

• •

Schedule D (For	rm 990) 2008	Page 5
Part XIV	Supplemental Information (continued)	
••••••		
		·
		•••••
		· · · · · ·
•		
•••••		
•••••		
		-

· .

Schedule F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047
2008
Open to Public Inspection
yer identification number
7325778

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, line 15, or line 16.

The Foundation for a Christian Civilization, Inc.

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.
- 3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
South America	N/A	N/A	Grantmaking	N/A	194,000
	<u></u>				
			-		
	·				
<u></u>					
	N/A	N/A			194,000

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50082W Schedule F (Form 990) 2008

Schedule F (Form 990) 2008								Page 2
Part II	Grants and Other Assis Part IV, line 15, for any r Use Schedule F-1 (Form	ecipient who receive	ed more than \$5,000	tside the United). Check this bo	i States. Comple x if no one recipi	ete if the orga ient received	anization answer more than \$5,0	ed "Yes" to 00...	Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			South America	general su	180,000	wire trans.	0	N/A	N/A
			South America	general su	8,500	wire trans.	0	N/A	N/A
			South America	general su	5,500	wire trans.	0	N/A	N/A
	0 A - BUMAPUA U - RUPUDA								
		<u></u>							
								· · · · · · · · · · · · · · · · · · ·	
L	· · · · · · · · · · · · · · · · · · ·		1			ł	<u></u>	<u> </u>	L.,,

.

2	Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has	3
	provided a section 501(c)(3) equivalency letter	0
3	Enter total number of other organizations or entities	3

Schedule F (Form 990) 2008

.

Schedule F (Form 990) 2008

Т

Use Schedule F-1 (Form 990) if addit				(a) Mannar of	(f) Amount of	(a) Description	(b) Method of
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	WE - 0.4 MIR - 0.						
I							
	",				. <u></u>		
					, <u>_</u>		
					· · · · · -=		
1							

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Schedule F (Form 990) 2008

	ge 4
Part IV Supplemental Information Complete this part to provide the information required in Part I, line 2, and any other additional information.	
Part I, Line 2: Description of how grant funds are monitored outside of the country:	
Part IV Supplemental Information Complete this part to provide the information required in Part I, line 2, and any other additional information.	
funds. Such reports must include a narrative account of what was accomplished by the expenditure of the grant funds,	,
a financial statement of expenditures, copies of publications resulting from the grant, etc. The reports must be	
attested to by the appropriate financial officer of the grantee organization and a certified public accountant.	
In his opinion letter, the certified public accountant should clearly state that the grant funds were expended for	
the purposes for which the grantee organization requested the same.	
2. The grantee is required to maintain records of receipts and expenditures and to make its books and records	
available for inspection by the Foundation when so requested.	
3. The grantee shall acknowledge by letter the receipt of the grant funds. If these are made available in	
attested to by the appropriate financial officer of the grantee organization and a certified public accountant. In his opinion letter, the certified public accountant should clearly state that the grant funds were expended for the purposes for which the grantee organization requested the same. 2. The grantee is required to maintain records of receipts and expenditures and to make its books and records available for inspection by the Foundation when so requested. 3. The grantee shall acknowledge by letter the receipt of the grant funds. If these are made available in	

.

•

SCHEDULE G (Form 990 or 990-EZ) Department of the Treasury		ing or	Gamin	on Regarding g Activities	-	OMB No 1545-0047
Internal Revenue Service				\$15,000 on Form 990-EZ, line		Inspection
The Foundation for a Cl	nristian Civilization, Inc.				23	7325778
Part I Fundraisin	g Activities. Complete r	f the orga	anization a	answered "Yes" t	o Form 990, Part	IV, line 17.
 a Mail solicitations b Email solicitation c Phone solicitation d In-person solicit 2a Did the organization or key employees list b If "Yes," list the ten 	ns	ef g ment with or entity in r entities (1	Solicitati Solicitati Special f any individi connection	on of non-governm on of government fundraising events ual (including office with professional pursuant to agree	nent grants grants rs, directors, truster fundraising services ements under whic	es \$? ☑ Yes □ No h the fundraiser is
(i) Name of individu or entity (fundraise		custody of	ndraiser have or control of butions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount pard to (or retained by) organization
		Yes	No			
Donor Care Center, Inc.			✓	94,295	194,557	0
DMW Worldwide, LLC	consultin direct ma	Ψ	1	0	72,466	0
	data anal					
Total	-	stered or	►	94,295 solicit funds or h	267,023 as been notified it	0 iš exempt from
	k Reduction Act Notice, see the	Instructions	for Form 99f	0. Cat No 500831	H Schedule G (Fr	

• •

|- -

i.

-

Schedule G (Form 990 or 990-EZ) 2008

• •

•

Pa	rt II	Fundraising Events. Co more than \$15,000 on F	omplete if the organiza orm 990-EZ, line 6a. L	tion answered "Yes" to ist events with gross r	o Form 990, Part IV, lır eceipts greater than \$	ne 18, or re 5,000.	portec	1		
			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total (Add col (a) through	1		
			(event type)	(event type)	(total number)	col (c))			
Revenue										
eve	1	Gross receipts								
æ	2	Less: Charitable contributions								
	3	Gross revenue (line 1 minus line 2)								
	4	Cash prizes								
nses	5	Non-cash prizes								
Direct Expenses	6	Rent/facility costs								
Direct	7	Other direct expenses								
	8 9	Direct expense summary. Ad Net income summary. Comb	ine lines 3 and 8 in colu	mn (d)		()		
Pa	rt II		he organization answ	vered "Yes" to Form	990, Part IV, line 19,	or reporte	ed mo	re		
		than \$15,000 on Form				40-211				
nue) Total gaming (Add (a) through col (c))			
Revenue							-			
<u> </u>	1	Gross revenue								
s	_									
nse	2	Cash prizes								
Direct Expenses	3	Non-cash prizes								
Direc	4	Rent/facility costs								
	5	Other direct expenses .								
	6	Volunteer labor	□ Yes% □ No	□ Yes% □ No	□ Yes% □ No					
	7	Direct expense summary. Ac	ld lines 2 through 5 in c	olumn (d)		()		
	8	Net gaming income summar	v. Combine lines 1 and	7 in column (d)						
		<u> </u>		<u> </u>			Yes	No		
9		nter the state(s) in which the c								
а		the organization licensed to c	perate gaming activitie	s in each of these state	es?	. <u>9</u> a		<u> </u>		
b If "No," Explain:										
							_			
10a	W	ere any of the organization's	gaming licenses revoke	d, suspended or termir	nated during the tax yea	ar? 10;	a			
b	lf	"Yes," Explain:								
							1			
11	 Do	bes the organization operate g	aming activities with ne	onmembers?		11	-			
12	ls	the organization a grantor, be	eneficiary or trustee of	a trust or a member of	a partnership or other	entity				
	fo	rmed to administer charitable	gaming?			. 12				

Schedule G (Form 990 or 990-EZ) 2008

Schee	dule G (Form 990 or 990-EZ) 2008		P	Page 3
			Yes	No
13	Indicate the percentage of gaming activity operated in:			
а	The organization's facility			
b	An outside facility			
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address ►	~ .		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a]
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$	~	÷	
с	If "Yes," enter name and address:			
	Name ►		**	2
16	Gaming manager information:			
	Name ►	• • • •		
	Gaming manager compensation > \$	·		
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:	1		
 a	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
-	retain the state gaming license?	17a		
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$			

_ _

•

_

Schedule G (Form 990 or 990-EZ) 2008

SCHEDULE I		Grants and	Other Assista	nce to Organ	izations.			OMB No. 1545-0047
(Form 990)	I		ents, and Ind	_	•			2008
Department of the Treasury Internal Revenue Service	► (Complete if the orga	nization answered "Ye ► Attach to		V, lines 21 or 22.			Open to Public Inspection
Name of the organization			· · · · · · · · · · · · · · · · · · ·				Employer iden	tification number
The Foundation for a Christian	Civilization, Inc.						23	7325778
Part I General Information	on Grants and	Assistance						
 Does the organization maint the selection criteria used to Describe in Part IV the organ 	award the grants	or assistance? es for monitoring t	he use of grant funds	in the United States.		• •		. 🗹 Yes 🗌 No
Part II Grants and Other A Form 990, Part IV, In Part IV and Schedule	ne 21, for any rec	pient that receive	/ed more than \$5,0	00. Check this box	if no one recipient	receiv	ed more thar	n \$5,000. Use
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		Description of cash assistance	(h) Purpose of grant or assistance
-StLouis de Montfort Academy, Inc.	23-2821348	501(c)(3) school	170,300	0	N/A	N/A		General support.
P.O. Box 787 Rossville, KS 66533								
-Tradition, Family, Property	30-0374121	501(c)(3) charity	32,400	0	N/A	N/A		General support.
P.O. Box 787 Rossville. KS 66533								
-Free-Congress Research and Education Foundation. Inc.	52-1096057	501(c)(3) charity	10,000	0	N/A	N/A		General support.
-1423 Rowhatan St						ļ		
			· · · · · · · · · · · · · · · · · · ·	<u>. </u>				
2 Enter total number of section3 Enter total number of other of		ernment organizat	ions	•	· · · · · · · ·	• • •	>	30

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

.

.

Cat No 50055P

Schedule I (Form 990) 2008

.

-

Schedule I (Form 990) 2008

٠

Part III Grants and Other Assistance to Use Schedule I-1 (Form 990) if add			omplete if the orgar	nization answered "Yes"	on Form 990, Part IV, line 22.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
					······································
Part IV Supplemental Information. Comp	lete this part to p	rovide the information	tion required in Part	I line 2, and any other	additional information.
Part I, Line 2: Audited financial and narrative representation under Section Section 501(c)(3).					
Section 50 ((c)(5).					
		••••••			
		•••••••••••••••••••••••••••••••••••••••			
		•••••••••••••••••••••••••••••••••••••••			

.

Department of Internal Reven	or 990-EZ) the Treasury ue Service	0-EZ) ► Attach to Form 990 or Form 990-EZ. ► To be completed by organizations that answered asury "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.							OMB No 1545-0047 2008 Open To Public Inspection										
	e organization								mploye	r iden									
		a Christian Civilizatio			<u> </u>				23		73	2577	8						
Part I		Benefit Transactions (m 000	E7 C	out V	line /	በኩ					
		ipieted by organizations t		vereu i	'Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V							art v,	r	rected?					
1	(a) Name	e of disqualified person				(b) [Description of	transaction	ו				Yes	No					
								· · · · ·					1.00						
		<u> </u>				÷					-								
													1						
	-																		
unde	er section 4								ing the	e yea · · ·	r ▶ \$								
3 Ente	er the amour	nt of tax, if any, on line	2, abo	ve, reim	nbursed by	the orga	anization	•••	•	•••	▶ \$								
Part II	Loans to	o and/or From Interest	ted Per	sons.							<u></u>								
		npleted by organizations t			es" on Form	n 990, Pai	rt IV, line 26	, or Form	990-E	Z, Par	t V, lin	ie 38a							
(a) N	ame of interest	ed person and purpose		to or from inization?	1-7	onncipal amount by boa			(c) Original principal amount		ce due (e) in		(e) in default?		n default? (f) Approved by board or committee?		ard or		Intten ment?
				[
			То	From	·				Yes	No	Yes	No	Yes	No					
														<u> </u>					
		· · · · · · · · · · · · · · · · · · ·							+										
					· · · · · · · · · · · · · · · · · · ·														
					-														
Total .	· · ·				<u> </u>	. ► \$								ĺ					
Part III		or Assistance Benefitti ompleted by organizatio	-			on Form	990, Part I	V, line 2	7.										
	(a) Name of I	nterested person	(b) Re	lationship	between inte organizat		son and the	(c) A	mount	of gran	t or typ	be of a	sistan	ce					
			·		<u> </u>	<u> </u>													
													_						
										•									
Part IV		s Transactions Involvi				on Form	990, Part I	V, line 2	8a, 28	b, or	28c.		-						
(a)	Name of intere	ested person					nount of	(d) D	escriptio	on of tr	ansact	on		aring of					
			(b) Relationship interested perso organizati		on and the transaction		saction					organiz							
			Ecz:		D D-al-		44 074						Yes	No					
Drake, A					R.Drake R.Drake		<u>11,074</u> 35,120												
	harles Mich		· · · · · ·		R.Drake			employment			·								
	Antonio F.				L.Fragelli			employ						Ť					
	gna, Teresa	Α.			L.Fragelli		13,624							$\dot{\mathbf{v}}$					
		continuation of list.					,						<u> </u>	1					
			·										·						

· .

- -

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50056A Schedule L (Form 990 or 990-EZ) 2008

-

-

SCHEDULE O (Form 990)

.

.

Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.



Department of the Treasury Internal Revenue Service Name of the organization

The Foundation for a Christian Civilization, Inc.	23	7325778					
Section C: Additionally doing business as: The American Society for Defense of Tradition, Family and Property;							
Crusade Magazine; TFP; ANF; TFP Student Action							
Part I, Line 6: Approximately 45 full-time volunteers. Many others volunteer on a part-time basis throughout the year.							
Part III, Line 4d: Public Witness - 586,391; Adult Formation - 522,591; Youth Formation - 454,399; Studies - 271,030;							
Seminars - 93,858; Cultural Exchange - 547							
Part VI, Section A, Line 6: The Foundation is non-profit organization with corporate memb	ers. Th	ere is only one class					
of members. The members annually elect the Board of Directors and may accept new me	nbers o	or remove member.					
They may also remove directors and officers. A majority of the members may amend the	bylaws	of the organization.					
Members are prohibited from sharing in corporate earnings.							
Part VI, Section A, Line 7a: The corporate members have this power.							
Part VI, Section A, Line 7b: The Board of Directors is elected by the corporate members (see exj	planation for Line 6 above					
for class, decisions requiring approval, and nature of voting rights).							
Part VI, Section A, Line 10: The Treasurer prepares the Form 990, and a final copy of the 2	2008 Fo	rm 990 was provided to					
each board member. The Board of Directors will review the 990 at is monthly meeting in L	ecemb	er.					
Part VI, Section B, Line 12c: The Conflicts of Interest policy covers directors, officers, an	d their	family members.					
The Board of Directors makes the determination if a conflict of interest exists and reviews	s actua	conflicts.					
A member of the board who received compensation from the Foundation for services is p	reclud	ed from discussing and					
voting on matters pertaining to the compensation of other voting members of the board o	f direc	ors.					
A. Each director annually signs a statement affirming they have received copy of the con	flicts of	interest policy,					
read and understood it, agree to comply, and understands the Foundation is a charitable	organi	ration and that in order to					
maintain its federal tax exemption it must engage primarily in activities which accomplish	its of	its tax-exempt purposes.					
B. The Board annually reviews if compensation agreements and benefits are reasonable	whethe	r transactions and/or					
arrangements with interested persons conform to the Conflicts of Interest Policy, c. Whet	her agi	eements with other					
charitable organizations, employees, and third party payors further the Foundation's cha	ritable	ourposes and do not					
result in inurement or impermissible private benefit.							

Part VI, Section B, Line 15a: The Foundation's president is a full-time volunteer.

Schedule O (Form 990) 2008				Page 2			
Name of the organization			ation number				
The Foundation for a Christian Civilization, Inc.	23		7325778				
Part VI, Section C, Line 17: Alabama, Alaska, Arizona, Arkansas, California, Connecticut, I	lorida,	Georgia,	Illinois,				
Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi,							
New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio,	Oklaho	oma, Oreç	ion,				
Pennsylvania, Rhode Island, South Carolina, Tennessee, Utah, Virginia, Washington State	, West	Virginia, a	and Wiscor	nsin.			
Part VI, Section C, Line 19: No documents available to the public.				• • • • • • • • •			
Sched. L, Part IV:							
Col. A. Col. B Col. C Col. D Col. E							
Hiegert, Magdalena - Family member Benjamin Hiegert - 17,163 – employment - No							
Hiegert, Paulina K Family member Benjamin Hiegert - 12,408 – employment - No							
Ritchie, John E Family member Robert Ritchie - 31,669 – employment - No							
Ritchie, Joseph - Family member Robert Ritchie - 11,656 – employment - No							
Ritchie, Kevin E Family member Robert Ritchie - 14,897 – employment - No							
				 -			
	· • · · · • • • • • • •						
			.	•			

• .