SCANNED DEC 1 5 2010

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047
2009

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

Open to Public

Α	For th	ne 2009 calenda	ar year, or t	ax year beg	inning J	uly 1	2009, a	nd ending	Ju	ne 30	, 20 10	
В	Check If	applicable Pleas		organization	The Foundation	on for a Chri	stian Ci	vilization,	Inc.	D Em	ployer identificati	on number
		use IF		usiness As T	<u>ne American 1</u>	FP, America	Needs	Fatima		23		5778
	Name c	print o	or Numbera	nd street (or P O	, box if mail is not de	livered to street ad-	tress)	Room/suite		E Tele	phone number	
_	nitial re	See	P.O. Bo							(785	5) 548-	6268
$\overline{}$	Termina	Specif	c- City Of t		ountry, and ZIP +	4						
	Amende	ed return tions		le, KS 6653						G Gros	ss receipts \$ 7	7,458,003
	Application	on pending FN	iame and add	ess of principa	al officer: Raym	ond E. Drak	e		H(a) Is thi	s a group re	eturn for affiliates?	Yes No
		1358			g Grove, PA 1						es included?	
					4947(a)(1) or	527] If "N	lo," attac	h a list. (see Instr	uctions)
		ite: ► tfp.org;									number >	
		organization: 🗹 Co	prporation L T	rust L. Associa	tion ☐ Other ►		L Year	of formation	1973	M Stat	e of legal domicile	NY
Pa	art I											
	1	Briefly describ	e the orga	nization's m	nission or mos	t significant a	ctivities	: To furth	er the va	ilues o	f Christian Ci	vilization
ø					lition, family a							
arc		throughout A			, the corporat	ion organize	d over 4	4,200 Publ	lic Squar	e Rosa	ry Rallies for	
Ę		America in O										
õ		Check this box										
જ		Number of vo										6
Activities & Governance		Number of inc	•	_	_			-		. 4		2
žį.	3	Total number		-						. 5		63
ĕ	1	Total number		•						7		45
		Total gross un								. 7		<u> </u>
	B	Net unrelated	DUSITIOSS R	anabie iiico	ine ironi i onii	930-1, 1116 0	-,	` 	Prior Y		Current	
		O-marile valore		/Dark \////	!== 1 h \			 		900,63		7,026,371
ë		Contributions	_							32,53		34,289
Revenue		Program servi Investment inc		-						20,37		10,318
8		Other revenue	•					· · ·		207,75		247,718
		Total revenue-						∍ 12) · ├─	7	161,30	- t	7,318,696
	 	Grants and sir								414,98		341,240
	1	Benefits paid				• •					0	0
es	L	Salaries, other		•		•	 1 lines 5	5-10)	1	390,09	7 1	1,490,104
Expenses		Professional fu					,,	1		267,02	3	224,198
នី		Total fundralsi					1,254,5	544 🖼	学では	SAME R	为 引进 的 的	PART IN
		Other expense							4	484,96	4 4	1,996,520
	12	Total evpense	e Add line	e 13 17 (m	ust equal Part	IX railmo (A), line 2	25).	6	557,06	9 7	7,052,062
	19	Revenue less e	expenses. S	ubract liner	19 from line 12		·····			604,23	3	266,634
Assets or d Balances	}			'''	-, - 0 2010	ارنا		Be	ginning of C	urrent Ye	ear End of	Year
Set	20	Total assets (i	² art X, line	16)						396,84		5,744,309
		Total liabilities	(Part X, lin	e 26) O (SDEN, U	T J				245,27		269,710
		Net assets or		ces. Subtra	ct line 21 from	riine 20			5	151,56	4 5	5,474,599
128	art II	Signature										
		and belief, it is	or perjury, 1 a true, correct, 1	eciare that i na and complete.	ve examined this r Declaration of prej	eturn, including a parer (other than	officer) is	ying schedule based on all	es and state Information	ments, ar of which	nd to the best of m preparer has any	y knowledge knowledge,
C:-		\mathcal{L}		CALK								
Sig _He		Signature a	flofficer—		Legal							
_пе	re	11 72		1	10 1							
			m name and t	- / - / ·	ticser!							
		-	name and t	<u>.</u>								
		Preparer's signature	NUT	L. (1 man							
Paid		,	NW	ome,	-10 M	4						
	parer's	Firm's name (or	yours L	Deloitte Tax	LLP							
Use	Only	if self-employed address, and Zi	0. –	1601 Dodge	Street, Suite 310	0						
Ma	v the	IRS discuss th		Omaha, NE	68102							

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

Par	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: This society is a civic, cultural and nonpartison 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.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
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 \$1,756,098 including grants of \$0) (Revenue \$160,980) Direct Mail: America Needs Fatima was the Foundation's 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 1.3 million letters were sent to current America Needs Fatima campaign members in a total of 16 mailings. As part of the direct mail outreach, 145,000 devotional Fatima calendars, 80,000 booklets Exposing Socialism: The Errors of Russia, and 90,000 novenas to St. Therese were mailed. Also, 35,000 letters were sent to ANF members asking them to protest the blasphemous production: The Most Fabulous Story Every Told. Crusade magazine is mailed six times a year to approximately 90,000 people. America Needs Fatima distributed 1.8 million pictures of Our Lady of Fatima as part of its effort to enthrone Mary in Every Home.
4b	(Code:) (Expenses \$ 1,002,086 including grants of \$ 13,572) (Revenue \$ 75,213) Publications – The Foundation continued publishing its bi-monthly magazine, Crusade, which is sent to an average of 90,000 people. The Foundation published a new biography on Col. John W. Ripley titled: An American Knight: The Life of Colonel John W. Ripley, USMC. A total of 15,187 books related to the furtherance of the values of Christian civilization were distributed during the fiscal year. The statement "Is it Fair that the Innocent Pay for Guilty?" which defends the Catholic Church from attacks from pressure groups was published in The New Haven Register, The Hartford Courant, The Appleton Post, and The Green Bay Gazette. Also, the Foundation continued to maintain three websites: the TFP site, ww.tfp.org, the America Needs Fatima site, www.anf.org, and the TFP student action website, www.tfpstudentaction.org. These sites received an estimated one million visitors during the fiscal year. Generally one article or position paper is published each week on the TFP site. The two other sites publish information about the activities of each campaign.
4c	(Code:) (Expenses \$ 610,022 including grants of \$ 0) (Revenue \$ 131,402) 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 115,391 religious articles, including statues, rosaries, crucifixes, Miraculous Medals, Consecration cards, First Saturday pledges, and devotional audio CD's. FCC representatives gave 1,886 presentations on the message of Our Lady at Fatima in homes, schools, and nursing homes. An estimated 20,000 people attended a Fatima presentation last year.
4d	Other program services. (Describe in Schedule O.) (Expenses \$ 2,111,930 including grants of \$ 314,293) (Revenue \$ 33,896)

Par	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		✓
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		√
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	✓	
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	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		√
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	7		√
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10		1
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	1	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	737) - 32		
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	in in		*
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		5 D	
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			1
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	表別	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			X.
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a	✓	√
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	1	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.	15	1	_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	1	
	-Did-the-organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		1
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	<u> </u>	✓

Pai	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		. ✓
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		V
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	✓_	ļ
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	1	
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
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		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		1
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	1	
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		1
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		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
]	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	'24		
	U.S. Information Returns Enter -0- if not applicable	441		}
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . [1b]	م أواسي. الم	4-	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	تديعهم	<u></u>	
	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year engaged by this return 2a 67		a "	-
	Statements, filed for the calendar year ending with or within the year covered by this return	2b	<u> </u>	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	-	.:	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)		,	- 1
32	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			- 4
ou	this return?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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		/
b	If "Yes," enter the name of the foreign country: ▶	Mer.	1984 ·	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank		* 4. "-	-1.7 K
- -	and Financial Accounts.	5a		1
b b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	-		<u> </u>
·	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		√
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	'		
	gifts were not tax deductible?	6b	, ,	5 ~ 1
7	Organizations that may receive deductible contributions under section 170(c).		5, 5 - 5 M	**************************************
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	.a	1
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
·	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	**************************************	مه″: ′بر"	Park is
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	ا سلىگ	Æ.	34
	benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		
8	required?	المراجعة الم	, in the	
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	47 874	4.	
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	4.4	15.1	3.45
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	il.	2000	P.
	Initiation fees and capital contributions included on Part VIII, line 12			7
	aross receipts, included on rollin 550, rait vill, line 12, for public use of club facilities	- 5.00	~ * * * * * * * * * * * * * * * * * * *	A Carte
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	2.50 mg	,3 ~ 51.2 - 7	
a		1	1 Traff	1. 人
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	, 49. · ·	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	a. Maria
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12h		1500	7,727

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

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body	,	مارس مرد	2.00
b	Enter the number of voting members that are independent	-	- 1.1 - 1.25 1.25€	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	- ^	~g , 945*	
2		2	Fixth	
_	any other officer, director, trustee, or key employee?			
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		
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		
6	Does the organization have members or stockholders?	6	✓_	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	✓	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		_✓_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		₽.	in the
_	the year by the following:	3.3		
а	The governing body?	8a	√	
	Each committee with authority to act on behalf of the governing body?	8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
·	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		1
Sec	tion B. Policies (This Section B requests information about policies not required by the International Control of the International			
	enue Code.)	Ji i i i di		
7100	cride Gode.)		¥	N
		40-	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		
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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	✓	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	, Jajo	Tit:	1
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	\	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		1
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
C	describe in Schedule O how this is done	12c	✓	
13	Does the organization have a written whistleblower policy?	13	1	
	Does the organization have a written document retention and destruction policy?	14	1	
14		- W. W.		27
15	Did the process for determining compensation of the following persons include a review and approval by		(d. 260 %	
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	450	. Acciden	
a	The organization's CEO, Executive Director, or top management official	15a 15b		-
b	Other officers or key employees of the organization	IOD		Y
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		1	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		<u> </u>	*****
	with a taxable entity during the year?	16a	<u> </u>	✓
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	Ŵ.		12 gr. 12
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	**************************************	-	3. úz. a : 1
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
-17-	List the states with which a copy of this Form 990 is required to be filed ▶ See Schedule O for the list of	state	s.	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c			
. •	available for public inspection. Indicate how you make these available Check all that apply.	دردارد	Jily)	
	Own website Another's website Upon request			
46	· · · ·			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	ot int	erest	
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds o	f the	
	organization: ► Catherine E. Slobodnik, 426 Main St., Rossville, KS 66533 (785) 584-6268			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not co		any c	urre	ent	offi	cer, d	lirec	tor, or trustee.		
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	o Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	compensation from from related organizations (W-2/1099-MISC)	
Raymond E. Drake, President and Director		1		1				0	0	0
John W. Horvat, Vice-President and Director		√		√				0	0	0
Luiz A. Fragelli, Director		1						55,662	0	0
Gary J. Isbell, Director		1						36,952	0	0
C. Preston Noell, III, Director		1						0	0	0
Robert E. Ritchie, Director		1						28,875	0	0
Benjamin A. Hiegert, Secretary-Treasurer				1				40,540	0	0

Part VII Section A. Officers, Directors, T		/ Emp	loy			a Hig	nes			
(A)	(B)		/-		C)		-1. A	(D) Reportable	(E)	(F)
Name and title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	a Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	Reportabli compensation from relate organization (W-2/1099-M	on amount of other compensation
										_
	-									
								:		
							<u> </u>			
1b Total								162,028		
Total number of individuals (including bureportable compensation from the organization)		l to th	ose	list	ed a	above	e) w	ho received m	ore than \$10	00,000 in Yes No
 Did the organization list any former officemployee on line 1a? If "Yes," complete For any individual listed on line 1a, is the the organization and related organization 	Schedule J sum of rep	for so	<i>ich</i> le c	ind. omj	<i>ividi</i> pen:	<i>ual</i> sation	an	 d other compe	 ensation from	d 3 4
 individual. Did any person listed on line 1a received services rendered to the organization? In 	e or accrue	com	pen	satı	on	from	anv	unrelated orc	 janization fo	or
Section B. Independent Contractors	res, com	piete	SCF.	ieul	IIC .	, IOF S	sucr	i persori	· · · · ·	_ 5 √
Complete this table for your five highest compensation from the organization.	compensate	ed inc	lepe	ende	ent	contra	acto	ors that receive	d more that	n \$100,000 of
(A) Name and business	address						-	(B) Description of s	services	(C)Compensation
Oblon, Spivak, McClelland, Maier and Neus	tadt, LLP						le	gal services		170,86
1940 Duke St., Alexandria, Virginia 22314 DMW Worldwide, LLC, 36 Cordage Park Cir	., Ste. 225 F	Plymo	uth	, M	A 02	2360	fu	ndraising con	sultant	225,07
Donor Care Center, Inc.							_			
480 West Tuscarawas Ave., 3rd Fl., Barber			L 1° -		- A L	Alecci		lemarketing fu		157,29
2 Total number of independent contractors more than \$100,000 in compensation fr					o to	tnose	ııst	ed above) who	received	

Form 9	•	·	_						Page 9
Part	VIII	Statement of Rev	venue			(A)	(B)	(C)	(D)
						Total revenue	(B) Related or exempt function revenue	Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns		1a	0				
gra	b	Membership dues		1b	0				
gifts, ilar an	С	Fundraising events		1c	0				İ
igi ilar	d	Related organizations		1d	0				
sim.	е	Government grants (contri	butions).	1e	0				
utic Jer	f	All other contributions, gifts, g				*			
향함		and similar amounts not include		1f	7,026,371	1	*		
E E	_	Noncash contributions include	d in lines 1a-1	f: \$		7,026,371	~		, ,
	n	Total. Add lines 1a-1f	· · · ·	· · · ·	Business Code	7,020,371		•	
a e	_	Sales of Prints and Ca	alendars		511190	311	311	0	0
eve	2a	Seminar Registration			900099	33,896	33,896	0	0
ě	b	Commissions web ref			900099	82	82	0	0
ğ	C	•••••			300033		- 02		
Program Service Revenue	d								
gra	e f	All other program service	ce revenue						
Po	ı	Total. Add lines 2a-2f			🕨	34,288		\$. L "!, :	No. 1 1, 7 1, 447 -
	3	Investment income (inc				. ,	,		
	3	other similar amounts)	-		I	13,361	0	0	13,361
	4	Income from investment o			I	0	0	0	0
	5	-			▶	0	0	0	0
			(i) Real		(ii) Personal	ijas ģ	, , , , , , , , , , , , , , , , , , ,	eng e e	~
	6a	Gross Rents		50	0	, *, , , , , , , , , , , , , , , , , ,	٠ يشير يو. ر	jan sija v s	, [~ ~
	ь	Less: rental expenses		0	0				
	С	Rental income or (loss)		50	0		تسمست مستفعل سكات		لقيقيت خيا
	d	Net rental income or (lo	oss) .		▶	50	0	0	50
	7a	Gross amount from sales of	(i) Securitie		(iı) Other	, , , , , , , , , , , , , , , , , , ,			,
		assets other than inventory		493	9825	~~	Tar i i i i	· · ·	
	b	Less. cost or other basis		500	40050	-17:1	, , , , , , , , , , , , , , , , , , ,		
		and sales expenses .		508 (15)	12852	~ <u>`</u>	2,2 -2 1 .	್ಷ	Tamer
		Gain or (loss)		(15)	(3,028)	(3,043)	0	0	(3,043)
	d	Net gain or (loss)		• •	<u> – </u>	(3,043)	- 1 k		"
venue	8a	Gross income from fundraising				En Silve Grand	8 m 4 4 4	A MA GAMA &	小海 化单型
₹		events (not including \$ of contributions reported				to the off the set	ا الله الله الله الله الله الله الله ال	* -y- 4, % ~ 1	
æ		See Part IV, line 18			ol	, w 1	,		1 00 7 100
Other	b			· a	0	, , , , , , , , , , , , , , , , , , ,		- ' ~	
ŧ		Net income or (loss) fro			vents	0	0	0	0
		•		-		<u></u>		. شده	y
	Ja	Gross income from gam See Part IV, line 19			0	~ % 2	المراجعة المراجعة	21 8 2 7	, , , , ,
	b	Less: direct expenses.			0	۵,		** × *	, , ,
	C	Net income or (loss) from	om gaming	activ	ities 🕨	0	0	0	0
	10a	Gross sales of inve	entory, le	ss		2			
		returns and allowances		. а	217,985	*			
		Less cost of goods so		. b					
	С	Net income or (loss) from		nvente		78,678	78,678	0	0
		Miscellaneous-Rev			Business Code	400 00-			400 000
	11a	•••••	org.		532000	160,980	_		160,980
	b	Insurance Proceeds			900099	6,384	0	0	6,384
	C	Credit Card Rewards			900099	1,626	0	0	1,626
	1	All other revenue				460 000		1	*1
	12	Total. Add lines 11a-1 Total revenue. See ins			💺	168,990		0	242 647
	14	Total revenue. See Ins	siructions.		P	7,318,696	112,967		213,647

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	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	150,902	150,902	-	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	1,838	1,838		
3	Grants and other assistance to governments,			,	
	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	188,500	188,500	~ ~	
4	Benefits paid to or for members	0	0	~ ₹	
5	Compensation of current officers, directors,				
	trustees, and key employees	162,028	127,893	15,041	19,094
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	198,557	156,708	18,437	23,412
7	persons described in section 4958(c)(3)(B)	1,011,828	798,832	93,821	119,175
7	Other salaries and wages Pension plan contributions (include section 401(k)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,
8	and section 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	117,690	92,920	10,894	13,877
11	Fees for services (non-employees):				_
а	Management	0	0	0	0
	Legal	176,559	172,138 0	4,421 35,257	0
	Accounting	35,257	0	33,237	0
d	, ,	224,198			224,198
_	Professional fundraising services. See Part IV, line 17	0	0	0	224,130
f	Investment management fees	11,141	10,760	76	304
9 12	Other	53,442	50,785	2,425	233
13	Office expenses	217,919	184,073	9,413	24,432
14	Information technology	116,317	101,642	3,344	11,331
15	Royalties	0	0	0	0
16	Occupancy	348,753	308,812	16,740	23,201
17	Travel	374,859	341,243	15,532	18,084
18	Payments of travel or entertainment expenses	_			_
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	54,599	54,538	60	1
20	Interest	0	0	0	
21	Payments to affiliates	240,631	186,858	34,535	0 19,237
22 23	Depreciation, depletion, and amortization	43,487	18,441	23,840	1,206
				~ * v . ~ ~	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together	y '	*, *	, , , , , ,	* * * * * * * * * * * * * * * * * * * *
	and labeled miscellaneous may not exceed		* , ,	3 % \$.\$	
	5% of total expenses shown on line 25 below.)	** **		, ,,,	\$ 1.5 4 5
а	Printing Expenses	1,090,194	868,221	1,279	220,694
b		1,246,678	906,598	5,124	334,956
—с	- Mass Mailing-Services	524,965	446,212	0	78,753
d		158,878	139,732	6,779	12,367
е		103,242	20,941	466	81,835
	All other expenses Misc. Expenses	199,599	151,548	19,896 317,381	28,155
25 26	Total functional expenses. Add lines 1 through 24f Joint costs. Check here ► ✓ if following	7,052,062	5,480,137	311,301	1,254,544
20	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	•			
	fundraising solicitation	2,279,879	2,035,194		244,685

		(A)		(B)
η		Beginning of year		End of year
1	Cash-non-interest-bearing	40,322	1	85,508
2	, ,	1,715,683	2	1,698,92
3		0	3	45.00
4		28,218	4	15,29
5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of	die de ference de la companya della companya de la companya della		
	Schedule L	917	_5_	1,00,000,000
(4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete		, ·	
1	Part II of Schedule L	69	6_	11
8	Notes and loans receivable, net	0	_7_	ļ <u>- </u>
Ε	Inventories for sale or use	477,441	8	430,05
ع ١		232,150	9	195,29
10	other basis. Complete Part VI of Schedule D		1, 2	
	b Less: accumulated depreciation 10b 1,238,365	1,749,485	10c	1,845,14
11	Investments—publicly traded secunties	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		0	14	
15	Other assets See Part IV, line 11	1,152,557	15	1,473,97
16	Total assets. Add lines 1 through 15 (must equal line 34)	5,396,841	16	5,744,30
17	Accounts payable and accrued expenses	167,839		238,85
18	Grants payable	0	18	
19	Deferred revenue	0	19	
20	Tax-exempt bond liabilities	0		
21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	
21 22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
'	persons. Complete Part II of Schedule L	0	22	
23	Secured mortgages and notes payable to unrelated third parties	37,122	23	<u> </u>
24		0	24	
25		40,317		30,86
26	Total liabilities. Add lines 17 through 25	245,277	26	269,71
3	Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.		، را فروس ایک هستا	
27	Unrestricted net assets	10,595,463	27	14,017,29
28		(5,438,909)	28	(8,543,04
2 29	· · · ·	0	29	
27 28 29 29 31 32 32 33				Arabado Albardos (1 1 i junto 1 de la como de 17
3 30	Capital stock or trust principal, or current funds		30	
3 31			31	
32	• • •		32	
33		5,151,564	33	5,474,59
34		5,396,841		5,744,30

Pai	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other	,		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	1		
	Schedule O.		<u> </u>	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	✓	
b	Were the organization's financial statements audited by an independent accountant?	2b	✓	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, explain in		. 4 .	,
	Schedule O.	,* ¿,	7- iš	3
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were) and (jeger :	12,
	issued on a consolidated basis, separate basis, or both:	3,	24- 1	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	سنند	*84	<u> </u>
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? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047
2009
Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number 7325778 The Foundation for a Christian Civilization, Inc. 23 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 33\% % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **b** Type II c Type III-Functionally integrated e Dy checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). h (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9) in col (i) listed in your the organization in organization in col support governing document? above or IRC section col (i) of your (i) organized in the (see instructions)) support? Yes Yes Yes Nο No No 77.2 8.

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (b) 2006 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) (a) 2005 (c) 2007 Gifts, grants, contributions, and membership fees received. (Do not 6,900,636 6,083,951 6,416,310 7,194,660 7,026,371 33,621,928 include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on 0 0 0 0 0 0 its behalf The value of services or facilities furnished by a governmental unit to the 0 0 0 0 0 0 organization without charge 6,416,310 7,026,371 33,621,929 6,083,951 7,194,660 6,900,636 Total. Add lines 1 through 3 . . . 考虑方, ÷. ~ - j&- - j 心清 -41 44 MED BE 192 The portion of total contributions by each 4.--4. F-WP. 換集のは 13381. 5. 爱 person (other than a governmental unit or 7 ~ . publicly supported organization) included **** : 1 ~ F on line 1 that exceeds 2% of the amount 20世代。(诗诗) 1,208,124 shown on line 11, column (f) Public support. Subtract line 5 from line 4. 1, 1, 1 32,413,805 Section B. Total Support (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) 6,083,951 6,416,310 7,194,660 6,900,636 7,026,371 33,621,929 Amounts from line 4 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar 28,119 58,874 56,523 20,965 13,411 177,892 Net income from unrelated business activities, whether or not the business is 0 0 0 0 0 0 regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) THE REPORT OF THE PARTY OF THE 33,799,821 11 Total support. Add lines 7 through 10 . 1.324.726 Gross receipts from related activities, etc. (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage 95.90 % 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 95.48 15 Public support percentage from 2008 Schedule A, Part II, line 14 16a 331/3 % support test - 2009. If the organization did not check the box on line 13, and line 14 is 331/3 % or more, check this box b 33% % support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33% % or more, check this 17a 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. b 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions > 18

Sched	dule A (Form 990 or 990-EZ) 2009						Page
Par	Support Schedule for Orga (Complete only if you checked				1)(2)		
Sec	tion A. Public Support	ed the box of	i lille 9 Ol 1 a	11 (1.)			
	llendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b	d 0- 60 0-7- 200	organia it stage to	350000000000000000000000000000000000000	1 1 8 2 ar 7 ar	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
8	Public support (Subtract line 7c from line 6.)						
	etion B. Total Support	(-) 000E	(h) 0006	(-) 2007	(4) 2008	(-) 2000	(A Total
	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	Amounts from line 6						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b		ļ				
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						

0.	ichdar year (or hacar year beginning in)	(a) 2000	(D) 2000	(0) 2001	(4) 2000	16	2003	(i) 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							
c 11	Add lines 10a and 10b							
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.)							
14	First five years. If the Form 990 is for organization, check this box and stop	here	<u></u>					
Sec	tion C. Computation of Public Su	pport Perce	ntage		=.			
15	Public support percentage for 2009 (lin	ne 8, column (f	divided by lin	ne 13, column	(f))	15_	<u> </u>	%_
_16	_Public-support-percentage-from-2008-					16		%
	tion D. Computation of Investme							
17	Investment income percentage for 200			d by line 12 is	olumn (fl)	17		%
	Investment income percentage for 20	,	* * * * * * * * * * * * * * * * * * * *		. , ,	18		%
18	, ,		•				bon 201/	
19a	331/3 % support tests – 2009. If the org							
b	331/3 % support tests — 2008. If the organine 18 is not more than 331/3 %, check this							
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19t	o, check this b	ox and	d see ins	tructions 🕨 🛚
					Sch	edule /	(Form 99	0 or 990-EZ) 200

Schedule A (Fo	orm 990 or 990-E	Z) 2009													Page 4
Part IV	Supplement	ntal Ir	nform	ation.	Comp	olete ti	his 12	part to	o prov	ide the	e explana	ations r	equired	by Part	t II, line 10; structions.
····	T drt II, IIIIc	174	<i>31</i> 17 C	, and	Tarti	1, 11110	12.	11001	uc arry	/_Other	addition	ai irrioi	mation.	<u> </u>	structions.
			•••							 -		- 		••	
			• • • • • • • • • • • • • • • • • • • •									•••••			
				·		••••				•••••				•••••	
				·		•				•				·	
•••••	•		· • • • • • • • • • • • • • • • • • • •				· • • • •								
				· • • • • • • • • • • • • • • • • • • •			·								
				. .											
										•••••				·	
	•							·							
				•••••	••										
		•													
							• • • • •								
				••••			·•								
							·								
••										<u></u>	<u></u>	<u></u>			******
		•-•													
**********							. -								

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

▶ Complete if the organization is described below.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. 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.

•	Section 501(c)(4), (5), or (6) orga	nizations: Complete Part III.	, , , , , , , , , , , , , , , , , , , ,			
	me of organization			1		er identification number
	e Foundation for a Christia rt I-A Complete if the	n Civilization, Inc. e organization is exempt unde		V i	23	7325778
1 2 3	Provide a description of the Political expenditures . Volunteer hours	e organization's direct and indirect	t political campai	gn activities in P		
Pai		e organization is exempt und				
1 2 3 4a b	Enter the amount of any enter the organization incurred Was a correction made? If "Yes," describe in Part I"		managers under m 4720 for this ye	section 4955 . ear?	► \$ · · ·	Yes No
Pa		organization is exempt und				601(c)(3).
 Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POI line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political or 					\$ on \$ \$	Yes No
5	were made. For each organize contributions received that we	s and employer identification numbe zation listed, enter the amount paid fi were promptly and directly delivered mmittee (PAC). If additional space is	om the filing organ to a separate politi	ization's funds. Al cal organization,	so ente such as	er the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid filing organization funds If none, ent	n's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
	· -					
		1				

Pa	rt II-A Complete if the organization is exe under section 501(h)).	mpt under section 501(c)(3) and	filed Form 5768	3 (election
	Check ► ☐ if the filing organization belongs to			
<u>B</u>	Check > if the filing organization checked t	oox A and "limited control" provision	ons apply.	
	Limits on Lobbying Expe (The term "expenditures" means amou		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public op	inion (grass roots lobbying)	9,976	0
b			634	0
c	Total lobbying expenditures (add lines 1a and 1b)	, , , , , , , , , , , , , , , , , , , ,	10,610	0
d	Other exempt purpose expenditures		7,091,362	0
е	Total exempt purpose expenditures (add lines 1c		7,101,972	0
f	Lobbying nontaxable amount. Enter the amount fr	•		
	columns.		505,099	505,099
	, ,, ,,	ing nontaxable amount is:		
	Over \$500,000 but not over \$1,000,000 \$100,000 p	olus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000 \$175,000 p	olus 10% of the excess over \$1,000,000	And San San	ಸ್ಥಾನ್ನ ಕ್ಷಮಿಕ್ಕಾ ಮೇ ಇ
	Over \$1,500,000 but not over \$17,000,000 \$225,000 p	olus 5% of the excess over \$1,500,000.		ووالمفار ويولونها الما
	Over \$17,000,000 \$1,000,000)		
g	Grassroots nontaxable amount (enter 25% of line	1f)	126,275	0
h	Subtract line 1g from line 1a. If zero or less, enter	-0	0	0
i	Subtract line 1f from line 1c. If zero or less, enter	-0	0	. 0
j	If there is an amount other than zero on either line section 4911 tax for this year?	1h or line 1ı, dıd the organızatıon file Fo		☐ 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 on page 4.)

Lo	bbying Expenditure	s During 4-Year	Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount	450,508	504,991	471,050	505,099	1,931,648
b Lobbying ceiling amount (150% of line 2a, column (e))					2,897,472
c Total lobbying expenditures	3,659	2,024	589	10,610	16,881
d Grassroots nontaxable amount	112,627	126,248	117,763	126,275	482,913
e Grassroots ceiling amount (150% of line 2d, column (e))					724,369
f Grassroots lobbying expenditures	3,659	2,024	0	9,976	15,659

Schedule C (Form 990 or 990-EZ) 2009

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)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total. Add 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 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).	nount
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)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total. Add 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 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).	17./
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total. Add 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 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the pnor year?	17./
d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total. Add 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 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).	17./
f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total. Add 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 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carryover lobbying and political expenditures from the pnor year? 3	17./
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total. Add 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 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 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 Did the organization agree to carryover lobbying and political expenditures from the pnor year?	17./
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 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 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 Did the organization agree to carryover lobbying and political expenditures from the pnor year?	17./
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members?	~~~~~~
1 Were substantially all (90% or more) dues received nondeductible by members?	ווכ
5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Yes N
501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is ans "Yes."	
1 Dues, assessments and similar amounts from members	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 Current year.	
b Carryover from last year	
c Total	
 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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 lobbying 	
and political expenditure next year?	
Part IV Supplemental Information	

Schedule C (Fo	orm 990 or 990-EZ) 2009	Page 4
	Supplemental Information (continued)	
•••••		
		•••••

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047
2009
Open to Public

Department of the Treasury ▶ Attach to Form 990. ▶ See separate instructions. Inspection Internal Revenue Service Name of the organization Employer identification number 7325778 The Foundation for a Christian Civilization, Inc. 23 : Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) . Aggregate value at end of year . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised Yes No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or pleasure) ☐ Preservation of an historically important land area ☐ Preservation of a certified historic structure ☐ Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements 2b **b** Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) . . . 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS_116, to report-in-its revenue-statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

b Assets included in Form 990, Part X .

Par	t III Organizations Maintainii	na Collections	of Art Hi	stori	cal Treasures	or (Other Similar	Asset	s (conti	inued)
3	Using the organization's acquisition, collection items (check all that apply		uner reco	rus, c	-		_	a Sigriiii	Jani usi	e or its
а	Public exhibition		d	\mathbb{H}	Loan or excha		_			
b	Scholarly research		е	Ш	Other					• • • • •
C	Preservation for future generation									
4	Provide a description of the organization Part XIV.	ation's collections	s and exp	laın h	ow they furthe	r the c	rganization's	exempt	purpos	e in
5	During the year, did the organization s assets to be sold to raise funds rather	than to be mainta	ained as p	art of	the organization	n's col	ection?	. [Yes	□ No
Par	Escrow and Custodial A IV, line 9, or reported an a					answe	red "Yes" to	Form 9	90, Pai	rt
	•							not _	Yes	□ No
b	If "Yes," explain the arrangement in	Part XIV and con	nplete the	follo	wing table:					
						_		Amour	<u>it</u>	
C	Beginning balance					. 10	_			
d	Additions during the year					. 10	<u> </u>			
е	Distributions during the year					. 16				
f	Ending balance					. 11	·			
b	Did the organization include an amount of "Yes," explain the arrangement in	Part XIV.				• •		. L	Yes	∐ No
Par	t V Endowment Funds. Co	mplete if the org	ganizatio	n ans	swered "Yes"	to Fo				
		(a) Current year	(b) Pric	or year	(c) Two years	s back	<u> </u>) Four yea	
1a	Beginning of year balance				12 11 11 11 11				7.2.8	
b	Contributions						PROMETER STATE	A. E		
C	Net investment earnings, gains, and losses									
d	Grants or scholarships	· -					Della Harris			134
	Other expenditures for facilities					74. T				
	and programs				- 3199EE.↓		3. 华的 🏩			
f	Administrative expenses				·		ER THE	(4) ET	<u> </u>	· · · · · · · · · · · · · · · · · · ·
g	End of year balance		<u> </u>		But in in	- ^ ` %	声"军"的"城"			西東に
2	Provide the estimated percentage o	f the year end ba	lance hele	d as:						
а	Board designated or quasi-endowm									
b	Permanent endowment ▶	%								
С	Term endowment ▶ %)								
3a	Are there endowment funds not in th	e possession of th	ne organiz	ation	that are held ar	nd adn	ninistered for t	he	_	
	organization by:	•	_					_	Ye	s No
	(i) unrelated organizations	<i>.</i>						. –	3a(i)	
	(ii) related organizations							. <u> </u> 3	Ba(iı)	
	If "Yes" to 3a(ii), are the related orga							. L	3b	
4	Describe in Part XIV the intended us									
Pai	t VI Investments—Land, Bu	ildings, and Ed	uipmen	t. See	e Form 990, P	art X,	line 10.	1		
	Description of investment	(a) Cost or o			Cost or other basis (other)		Accumulated lepreciation		l) Book va	alue
1a	Land		0		437,988	æ jr.			4:	37,988
b	Buildings		0		1,244,544		417,471		8	27,073
С	Leasehold improvements	.	0_		0		0	ļ		0
đ	Equipment		0		<u>1,400,981</u>		820,894		5	80,087
	-Other		0		0		0	ļ <u>.</u>		0
Tota	I. Add lines 1a through 1e (Column (d)	must equal Form 9	90, Part X	, colui	mn (B), line 10(c	<u>)) . </u>	▶		1.8	<u>45,147</u>

Schedule D (Form 990) 2009			Page 3
Part VII Investments—Other Securities	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			
Closely-held equity interests			
Other		<u> </u>	
			· · · · · · · · · · · · · · · · · · ·
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	-		, J., J.,
Part VIII Investments—Program Relate	d. See Form 990, Part X	. line 13.	
	(b) Book value	(c) Method of val	untion
(a) Description of investment type	(b) book value	Cost or end-of-year m	
	· · · · · · · · · · · · · · · · · · ·		
	1		
			-
		· 	
		 	
			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		**************************************
Part IX Other Assets. See Form 990, Pa			1 (1) 5 1 1
	(a) Description		(b) Book value
Works of Art			36,566
Land Improvements (less depreciation)			175,998
Building Improvements (less depreciation)			940,481
Asbestos Removal from Buildings			8,938
Advances to employees and Volunteers			7,243
Investments in Precious Metals at Market Valu	ı e		304,747
Total. (Column (b) must equal Form 990, Part X, col		<u> </u>	1,473,973
Part X Other Liabilities. See Form 990,	Part X, line 25.		
1. (a) Description of liability	(b) Amount	🔛 - 5 కశాహాణాలు ఈ షుదేశ్	
Federal income taxes			
Sales Tax Owed	2,81	18	
Reserve Asbestos Removal From Buildings	28,04	43 🗓 - 🕍 📜	
		- , , , , , , , , , , , , , , , , , , ,	
			* ^\$p × ' ' * .
			~_^ ~ ,
		~ * ,	*
		-	* * * * * * .
		,· ,· ,	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)	30.86	<u></u>	·

^{2.} FIN 48 Footnote. 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

chec	dule D (Form 990) 2009		Page 4
Par	T XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial S	tatemer	nts
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	7,318,696
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	7,035,419
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	283,277
4	Net unrealized gains (losses) on investments	4	56,058
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 through 8	9	0
0	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 .	10	339,335
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenu	e per R	
1	Total revenue, gains, and other support per audited financial statements	1	7,517,104
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	- 22	
b	Donated services and use of facilities	0	
С	Recoveries of prior year grants	0	
d	Other (Describe in Part XIV.)	0	
е	Add lines 2a through 2d	2e	56,058
3	Subtract line 2e from line 1	3	7,461,046
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	0	
b	Other (Describe in Part XIV.)		(4.40.050)
	Add lines 4a and 4b		(142,350)
5 Par	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) T XIII Reconciliation of Expenses per Audited Financial Statements With Expen		7,318,696
		1 1	7,177,759
1	Total expenses and losses per audited financial statements	26.79	1,171,730
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	0	
a	Donated services and use of facilities	0	
	rior year adjustments	0	
_	Other losses		
d	Other (Bessing in Cart Air).	2e	(142,334)
	Add lines 2a through 2d	3	7,035,425
3	Subtract line 2e from line 1	100 7 10 7	7,000,120
4_		0	
	investment expenses not included on Form 650, Fait Viii, into Fo	0	
	Other (Describe in Part XIV.)	4c	C
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	7,035,425
	rt XIV Supplemental Information		7,000,120
and his	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a a 2b; Part V, line 4; Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d a part to provide any additional information. In XII, Line 4b: Cost of Goods Sold, Inventory Lost from Shrinkage, Loss on Sales Other tha	nd 4b. A	lso complete ory, Investment
Bro	oker Fees.		
Pa	rt XIII, Line 2d: Cost of Goods Sold, Inventory Lost from Shrinkage, Loss on Sales Other tha	n Invent	ory, Investment
Bro	oker Fees.		

Schedule D (For	m 990) 2009	Page 5
Part XIV	Supplemental Information (continued)	
T. G. T. A. L.		
		•••••
		• • • • • • • • • • • • • • • • • • • •
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		•••••
• • • • • • • • • • • • • • • • • • • •		

Schedule F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

The Foundation for a Christian Civilization, Inc.

Employer identification number 23 7325778

Pa	rt I General Informa "Yes" to Form 990			e the United States.	. Complete if the organi	zation answered
1	For grantmakers. Does assistance, the grantees' the grants or assistance?	eligibility for th	e grants or as			ard
2	For grantmakers. Descri United States.	be in Part IV th	e organization	's procedures for monit	coring the use of grant for	unds outside the
3	Activities per Region. (Us	e Schedule F-1	(Form 990) ıf	additional space is nee	ded.)	
	(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 for region
Sou	uth America	N/A	N/A	Grantmaking	N/A	188,500
		 				
		 				
			•			
_		-			<u> </u>	
		-		+ , 7	2 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	

N/A

N/A

(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)
in the second of the second	and the second	South America	general suppo	6,000	wire transfer	0	N/A	N/A
The man of the second	a 1.	South America	general suppo	180,000	wire transfer	0	N/A	N/A
* * * * * * * * * * * * * * * * * * * *	. W							
93 × 4 5								
	1 2 35 55							
	and a gray							
A LI TO ME INTO THE A	જું જુંગાયમાં માર્મિય							
	18 · 18 · 18 · 18 · 18 · 18 · 18 · 18 ·							
Car to the second						d		
ere o o o o o o o o o o o o o o o o o o	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
				, _		· · · · · · · · · · · · · · · · · · ·		
	- "" "							
	1. 1/2 4 h . 1"							
	F							

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. Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or as	ssistance	(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)
			: 					
								-

Part IV	Supplemental Information Complete this part to provide the information required in Part I, line 2, and any additional information.
Part I, Line	2: Description of how grant funds are monitored outside of the country:
1. The gran	tee is required to provide an audited narrative and financial report to the Foundation on the use of the grant
funds. Suc	h 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 opin	ion letter, the certified public accountant should clearly state that the grant funds were expended for
the purpos	es for which the grantee organization requested the same.
2. The grar	ntee is required to maintain records of receipts and expenditures and to make its books and records
available fo	or inspection by the Foundation when so requested.
3. The gran	ntee shall acknowledge by letter the receipt of the grant funds. If these are made available in
installmen	ts, each installment shall be so acknowledged.
• • • • • • • • • • • • • • • • • • • •	

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Department of the Treasury Internal Revenue Service Name of the organization Employer identification number

The Foundation for a Christian Civilization, Inc. 23 7325778 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e Solicitation of non-government grants **b** Internet and email solicitations Solicitation of government grants Special fundraising events c Phone solicitations d ✓ In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Ves No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (i) Name of individual (II) Activity (iii) Did fundraiser have (iv) Gross receipts custody or control of contributions? (or retained by) fundraiser listed in (or retained by) organization or entity (fundraiser) from activity col (i) Yes No **Donor Care Center, Inc.** telemarketing 171.076 157.296 13,779 consulting direct mail and data analysis DMW Worldwide, LLC 645,671 225,075 420,597 816,747 434,376 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing. Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Florida, Georgia, Illinois, Hawaii, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts Michigan, Minnesota, Mississippi, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Utah, Virginia, Washington State, West Virginia, Wisconsin, and the District of Columbia

Pa	rt I	Fundraising Events. Comore than \$15,000 on F	omplete if the organizations 990-EZ, line 6a. L	tion answered "Yes" to	o Form 990, Part IV, li	ne 18, or reporte 55,000.	d
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) throug col (c))	gh
Revenue	1 2 3	Gross receipts Less: Charitable contributions Gross income (line 1 minus line 2)					
	4	Cash pnzes			-		
	5	Noncash prizes					
uses	6	Rent/facility costs					
Direct Expenses	7	Food and beverages	<u> </u>				<u>-</u>
Direc	8	Entertainment					
	9 10 11	Other direct expenses Direct expense summary. Ad Net income summary. Comb Gaming. Complete if t				()
Pa	ırt İ	Gaming. Complete if than \$15,000 on Form	the organization answ 990-EZ, line 6a.	vered "Yes" to Form	990, Part IV, line 19	, or reported m	ore
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming col (a) through co	
<u></u>	1	Gross revenue					
enses	2	Cash prizes					
Direct Expenses	3	Noncash prizes					
Direc	4	Rent/facility costs					
	5	Other direct expenses .	☐ Yes %	☐ Yes %	☐ Yes %		
	6	Volunteer labor	□ No	□ No	☐ No	* * * *	4, 4
	7	Direct expense summary. Ac	ld lines 2 through 5 in c	olumn (d)		()
	8	Net gaming income summar	y. Combine line 1, colur	nn d, and line 7	.		T
9 a b	l Is	nter the state(s) in which the c the organization licensed to c "No," explain:	pperate gaming activitie	_	es?	9a	s No
10a		ere any of the organization's "Yes," explain:	gaming licenses revoke				
11 12	ls	oes the organization operate of the organization a grantor, but would to administer charitable	eneficiary or trustee of		a partnership or other	r entity	7:3

	_
D	-
Page	

301100	die G (Form 990 of 990-EZ) 2009			uge e
			Yes	No
13	Indicate the percentage of gaming activity operated in:			١.
а	The organization's facility	┨.		
b	An outside facility	1	"	
14	Enter the name and address of the person who prepares the organization's gaming/special events books	İ	Ť	
	and records:			1
		.	,	
	Name ▶		ĺ	
		1	l. ´	
	Address ▶		ĺ. <i>.</i> .	.
		*		[^
15a	Does the organization have a contract with a third party from whom the organization receives gaming			
.00	revenue?	15a		
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$		45	٤.
	amount of gaming revenue retained by the third party ▶ \$	ء موان	ر الرابعة الرابعة	
С	If "Yes," enter name and address of the third party:		0.1	
-	,	, ,,,,,,	1 .	<i>-</i>
	Name ▶		4 2	
			G. ::	1 1 1 1 1
	Address ▶	1	277 1. 1922 - X	
			1	
16	Gaming manager information:			
		F.P.		1
	Name ▶		2. 3	
		1	1.14	
	Gaming manager compensation ▶ \$	345	A	
		áÁ		
	Description of services provided ▶	24	i ju	* *
		1	(/ Jan ()	5. 8.
	☐ Director/officer ☐ Employee ☐ Independent contractor	Jan 4	٠ - قرار	" = " - me - "
		Bec. 7		
17	Mandatory distributions:	1	1.12	
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	1	التناثر المراد	نَدُيُّت.
	retain the state gaming license?	17a		
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations	7	المنافعة الم	+ .3
	or spent in the organization's own exempt activities during the tax year ▶ \$	341-	**,	\$. ``

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No 1545-0047
2009
Open to Public

Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Employer identification number Name of the organization 7325778 23 : The Foundation for a Christian Civilization, Inc. Part I General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section (d) Amount of cash grant (e) Amount of non-cash 1 (a) Name and address of organization (b) EIN (book, FMV, appraisal, non-cash assistance or assistance or government if applicable assistance other) St. Louis de Montfort Academy. General Support N/A 23-2821348 501(c)(3) school 141.865 0 N/A Inc. P.O. Box 787 Rossville, KS 66533 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations . . 0

	Use Part IV and Schedule I-1 (Form		(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(f) Description of non-cash assistance		
	(4) 1) 50 01	grant or abbiotarios	recipients	cash grant	non-cash assistance	FMV, appraisal, other)			
									
			İ						
					1				
			_ ,		<u> </u>	<u> </u>			
		ntal Information. Comp lial and narrative reports o							
1: Au	dited financi	ial and narrative reports o	lescribing the use o	f grant funds for th	e purposes of the gra	ant are required for organ	nizations that are not recognized		
1: Au	dited financi	ial and narrative reports o	lescribing the use o	f grant funds for th	e purposes of the gra	ant are required for organ	nizations that are not recognized		
1: Au	dited financi	ial and narrative reports o	lescribing the use o	f grant funds for th	e purposes of the gra	ant are required for organ	nizations that are not recognized		
1: Au	dited financi	ial and narrative reports o	lescribing the use o	f grant funds for th	e purposes of the gra	ant are required for organ	nizations that are not recognized		
t 1: Au	dited financi	ial and narrative reports o	lescribing the use o	f grant funds for th	e purposes of the gra	ant are required for organ			
1: Au	dited financi	ial and narrative reports o	lescribing the use o	f grant funds for th	e purposes of the gra	ant are required for organ	nizations that are not recognized		
1: Au	dited financi	ial and narrative reports o	lescribing the use o	f grant funds for th	e purposes of the gra	ant are required for organ	nizations that are not recognized		
1: Au	dited financi	ial and narrative reports o	lescribing the use o	f grant funds for th	e purposes of the gra	ant are required for organ	nizations that are not recognized		
t 1: Au	dited financi	ial and narrative reports o	lescribing the use o	f grant funds for th	e purposes of the gra	ant are required for organ	nizations that are not recognized		
t 1: Au	dited financi	ial and narrative reports o	lescribing the use o	f grant funds for th	e purposes of the gra	ant are required for organ	nizations that are not recognized		
t 1: Au	dited financi	ial and narrative reports o	lescribing the use o	f grant funds for th	e purposes of the gra	ant are required for organ	nizations that are not recognized		
1: Au	dited financi	ial and narrative reports o	lescribing the use o	f grant funds for th	e purposes of the gra	ant are required for organ	nizations that are not recognized		
t 1: Au	dited financi	ial and narrative reports o	lescribing the use o	f grant funds for th	e purposes of the gra	ant are required for organ	nizations that are not recognized		
1: Au	dited financi	ial and narrative reports o	lescribing the use o	f grant funds for th	e purposes of the gra	ant are required for organ	nizations that are not recognized		
1: Au	dited financi	ial and narrative reports o	lescribing the use o	f grant funds for th	e purposes of the gra	ant are required for organ	nizations that are not recognized		

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons
► Complete if the organization answered "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.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization 23 : 7325778 The Foundation for a Christian Civilization, Inc.

Part I Excess Benefit Transactions Complete if the organization answer								Part V	, line 4	Юь.		
1 (a) Name of disqualified person				/L\ F							(c) Con	rected?
1 (a) Name of disqualified person				(0) L	Description of	transaction	1				Yes	No
					· · · · · · · · · · · · · · · · · · ·							
2 Enter the amount of tax imposed on t under section 4958	_		-				ng the	year				
3 Enter the amount of tax, if any, on line									▶ \$			
Part II Loans to and/or From Interes	sted Per	rsons.										
Complete if the organization ar	nswered	"Yes"	on Form 99	0, Part I	V, line 26, d	or Form 9	990-E	Z, Pa	rt V, I	ine 3	Ва.	
(a) Name of interested person and purpose		to or from	(c) On principal		(d) Balan	ce due	(e) In (default?		ard or		Intten ment?
	То	From					Yes	No	Yes	No	Yes	No
Antonio Fragelli		1		114		114		1		√		1
Advance for business expenses to be												
made on behalf of the corporation.												
		Ì										
Total				. ▶ \$	1		- A	·	\$. No.	-: 8	,E,3	<u> </u>
Part III Grants or Assistance Benefit Complete if the organization ar	ing Inte	rested	Persons.	00, Part I	V, line 27.							
(a) Name of interested person			p between inte organizat	erested pers		(0) Amou	int and	type o	f assis	tance	
	1											
						-						
Part IV Business Transactions Involv	ina Inta	rootod	Doroono									
Complete if the organization ar				n Part I	V line 28a	28b or	28c					
					nount of						(-) Ch	
(a) Name of interested person			son and the tran		saction	(a) De	(d) Description of transaction			on	(e) Sharing organization revenues?	
Droke Anna I			D Droto		44 550						Yes	No
Drake, Anne L.			R.Drake			employ					 - -	1
Drake, Charles Michael Drake, Kenneth-W.			R.Drake			employ						1
Fragelli, Antonio F.						employ					-	√
Bentivegna. Teresa A.			L.Fragelli			employ					├-	√
pennyeuna, reresa A.	ıram.	memo.	. L.Frageill		13.3/2	PERMOTOR	ment				1	

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

Hiegert, Magdalena J.

Cat No 50056A

21,041 employment

Fam. memb. B.Hiegert

Schedule L (Form 990 or 990-EZ) 2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

or to provide any additional information.

Open to Public
Inspection

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service

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 - 670,070; Adult Formation - 564,449; Youth Formation - 461,498; Studies - 315,991; Seminars - 99,921. Part VI, Section A, Line 6: The Foundation is non-profit organization with corporate members. There is only one class of members. The members annually elect the Board of Directors and may accept new members or remove members. 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 explanation for Line 6 above for class, decisions requiring approval, and nature of voting rights). Part VI, Section B, Line 11 and 11A: The Treasurer prepares the Form 990, and a final copy of the 2009 Form 990 was provided to each board member. The Board of Directors will review the 990 at is monthly meeting in December. Part VI, Section B, Line 12c: The Conflicts of Interest policy covers directors, officers, and their family members. The Board of Directors makes the determination if a conflict of interest exists and reviews actual conflicts. A member of the board who received compensation from the Foundation for services is precluded from discussing and voting on matters pertaining to the compensation of other voting members of the board of directors. A. Each director annually signs a statement affirming they have received copy of the conflicts of interest policy, read and understood it, agree to comply, and understands the Foundation is a charitable organization 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 whether transactions and/or arrangements with interested persons conform to the Conflicts of Interest Policy, and whether agreements with other charitable organizations, employees, and third party payors further the Foundation's charitable purposes and do not result in inurement or impermissible private benefit.

D	•

Name of the organization				Employer ide	entification number				
The Foundation for	a Christian Civilization, Inc.			23	7325778				
Part VI, Section C, L	ine 17: Alabama, Alaska, Arizona, A	Arkansas, C	alifornia, Connecticut, F	lorida, Geo	rgia, Hawaii, Illinois,				
Indiana, Kansas, Ke	ntucky, Louisiana, Maine, Maryland	l, Massachi	usetts, Michigan, Minnes	ota, Missis	sippi,				
New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon,									
Pennsylvania, Rhode Island, South Carolina, Tennessee, Utah, Virginia, Washington State, West Virginia, and Wisconsin.									
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						
Ritchie, John E	Family member Robert Ritchie -	33,120 –	employment - No		•••••				
Ritchie, Kevin E	Family member Robert Ritchie -	16,152 –	employment - No						

			•	***********					
•••••									
	••••••			•••••					

					•				
•••••									
					••••••				

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

See separate instructions.

OMB No 1545-0047 2009 Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990.

Employer Identification number Name of the organization 23 7325778 The Foundation for a Christian Civilization, Inc. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Part I (d) Legal domicile (state End-of-year assets Direct controlling Name, address, and EIN of disregarded entity Primary activity Total income or foreign country) Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it Part II had one or more related tax-exempt organizations during the tax year.) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling or foreign country) (if section 501(c)(3)) entity Western Hemisphere Cultural Society, Inc. EIN: 13-3171782 Supporting Organizat. **New York** 501(c)(3) 509(a)(3) N/A 1358 Jefferson Rd., Spring Grove, PA 17362

Cat. No. 50135Y

Part III	Identific because	ation it had	of Related Orga one or more rel	anization: lated orga	s Taxable as a nizations treate	Partnership (C d as a partners	omplete if the o	organiza tax year.	tion an)	swered "Yes	s" to F	orm	990, Part IV, line	34
	(a) dress, and EIN I organization	of	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections	(f) Share of tota	al income	Share	(g) of end-of-year assets	Dispropo allocat	ortionate tions?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?
						512-514)					Yes	No		Yes No
		<u> </u>									i 			
		¦												
														
		ļ												
		-									-			
											<u> </u>			
		ļ												
				1										
•••••														·
Part IV	Identific	ation	of Related Orga e it had one or n	anizations	s Taxable as a	Corporation or	r Trust (Comple	ete if the	organ	ization answ	ered '	"Yes'	' to Form 990, Pa	art IV,
	11110 04 0	(a)		nore relact	(b)	(c)	(d)	(e)		(1)			(g)	(h)
N	ame, address,	and EIN	of related organization	1	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of (C corp.) or tru	S corp,	Share of total	income		Share of end-of-year assets	Percentage ownership
						 	<u> </u>	<u> </u>						
											-			
						<u> </u>						<u> </u>		
		¦	· · · · · · · · · · · · · · · · · · ·	•••••										
								 	-			+		
		<u> </u>										_		<u> </u>
	••													
		1			1	1	I	I				j i	i i	

Schedule R (Form 990) 2009

Pai	Transaction	ns with Helated Organizations (Complete if the organization answered Tres to Form 990, Part IV, line	34, 35, Or 3	.)			
No	te. Complete line 1 if a	any entity is listed in Parts II, III, or IV of this schedule.				Yes	No
		lid the organization engage in any of the following transactions with one or more related organizations listed in Pai	ts II-IV?	L.		1	
		(ii) annuities (iii) royalties or (iv) rent from a controlled entity		🗀	1a		✓_
		contribution to other organization(s)			1b		✓_
		contribution from other organization(s)			1c	✓	
		tees to or for other organization(s)			1d		<u> </u>
	<u> </u>	tees by other organization(s)		🗀	1e		<u> </u>
_	Journal of Francisco	(, , , , , , , , , , , , , , , , , , ,		1		ÈT.	. PATTA
f	Sale of assets to other	er organization(s)		📙	1f		✓
		om other organization(s)			1g		<u> </u>
				📙	<u>1h </u>		<u>√</u>
i	Lease of facilities, equ	uipment, or other assets to other organization(s)		🖵	1i		✓_
	,			_	.		
j	Lease of facilities, equ	uipment, or other assets from other organization(s)		🛏	1]		✓_
		tes or membership or fundraising solicitations for other organization(s)			1k		<u> </u>
ı	Performance of service	ses or membership or fundraising solicitations by other organization(s)		_	11	<u> </u>	✓
m	Sharing of facilities, e	quipment, mailing lists, or other assets		🗀	1m	✓	
n	Sharing of paid emplo			📙	<u>1n</u>		✓_
				_			
0	Reimbursement paid	to other organization for expenses			10		<u> </u>
р	Reimbursement paid	by other organization for expenses			1p		✓_
•	,						` -
q	Other transfer of cash	or property to other organization(s)			1q	_	<u> </u>
r	Other transfer of cash	or property from other organization(s)		<u> </u>	<u>1r </u>		<u>.</u>
2	If the answer to any o	of the above is "Yes," see the instructions for information on who must complete this line, including covered relation	onships and	transaction			lds.
		(a)	(b) Fransaction	Δm	(c) ount ir		1
		Name of other organization	type (a-r)	'""			
(1)	-		<u></u>				
/ 0\							
(2)			<u>.</u>				
(0)							
(3)							
143							
(4)	<u>_</u>						
(5)	İ						
(5)	1						
(6)							
101							

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	nstructions regarding exc (b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
	<u></u>		Yes	No		Yes	No		Yes	No
								, , , , , ,	-	
			-							
						1			 	