

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)  
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047  
**2009**  
**Open to Public Inspection**

**A For the 2009 calendar year, or tax year beginning 10-01-2009 and ending 09-30-2010**

- B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Terminated  
 Amended return  
 Application pending

**C** Name of organization: FOCUS ON THE FAMILY  
 Doing Business As:  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite:  
 8605 EXPLORER DRIVE  
 City or town, state or country, and ZIP + 4:  
 COLORADO SPRINGS, CO 809201049

**D** Employer identification number: 95-3188150  
**E** Telephone number: (719) 531-3400  
**G** Gross receipts \$ 112,953,874

**F** Name and address of principal officer:  
 DANIEL R MELLEMA  
 8605 EXPLORER DRIVE  
 COLORADO SPRINGS, CO 809201049

**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** Are all affiliates included?  Yes  No  
 If "No," attach a list (see instructions)  
**H(c)** Group exemption number ▶

**I** Tax-exempt status:  501(c) ( 3 ) (Insert no )  4947(a)(1) or  527  
**J** Website: ▶ www.focusonthefamily.com

**K** Form of organization:  Corporation  Trust  Association  Other ▶  
**L** Year of formation: 1977 **M** State of legal domicile: CO

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: FOCUS ON THE FAMILY SHARES THE GOSPEL OF JESUS CHRIST BY PROTECTING TRADITIONAL VALUES & THE FAMILY		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	12
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	10
	<b>5</b> Total number of employees (Part V, line 2a)	<b>5</b>	1,150
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	103
	<b>7a</b> Total gross unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	583,432
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	119,656,879	97,088,339
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,567,019	4,056,342
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	99,892	2,688
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,934,690	7,986,561
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)	130,258,480	109,133,930
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	3,834,550	3,857,798
<b>Expenses</b>	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	65,657,085	56,330,071
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 10,085,117	927,716	587,015
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	59,483,976	60,763,642
	<b>18</b> Total expenses—add lines 13–17 (must equal Part IX, column (A), line 25)	129,903,327	121,538,526
	<b>19</b> Revenue less expenses—subtract line 18 from line 12	355,153	-12,404,596
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	90,996,703	79,825,383
	<b>22</b> Net assets or fund balances—subtract line 21 from line 20	15,413,239	16,646,515
		75,583,464	63,178,868

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including attachments and all information furnished hereon, and I believe that the return and all information furnished hereon are true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**  
 Signature of officer: \*\*\*\*\*  
 DANIEL R MELLEMA TREASURER/CFO  
 Type or print name and title

**Paid Preparer's Use Only**  
 Preparer's signature: David C Moja Date:  
 Firm's name (or yours if self-employed), address, and ZIP + 4: Capin Crouse LLP, 972 Emerson Pkwy Ste A, Greenwood, IN 46143

May the IRS discuss this return with the preparer shown above? (see instructions)

**Part III Statement of Program Service Accomplishments**

**1** Briefly describe the organization's mission

FOCUS ON THE FAMILY (FOCUS) IS A NONDENOMINATIONAL RELIGIOUS ORGANIZATION WHOSE PRIMARY OBJECTIVE IS TO SPREAD THE GOSPEL OF JESUS CHRIST BY HELPING TO PRESERVE TRADITIONAL VALUES AND THE INSTITUTION OF THE FAMILY THE PRIMARY MEANS OF ACCOMPLISHING THESE GOALS ARE RADIO BROADCASTS, PERIODICALS, BOOKS, FILMS, VIDEOS, INTERNET AND EVENTS WHICH SHARE THE MESSAGE WITH CONSTITUENTS, SCHOOLS, CHURCHES AND THE PUBLIC AT LARGE IN THE UNITED STATES AS WELL AS AROUND THE WORLD

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O

**4** Describe the 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 \$ 18,607,627 including grants of \$ 329,595 ) (Revenue \$ )  
 BROADCASTS-15 DIFFERENT BROADCASTS ARE PRODUCED BY FOCUS ON THE FAMILY INCLUDING THE "FOCUS ON THE FAMILY" DAILY PROGRAM AND THE POPULAR FAMILY DRAMA, "ADVENTURES IN ODYSSEY " FOCUS BROADCASTS CAN BE HEARD FROM OVER 3,000 FACILITIES FROM VANCOUVER TO BUENOS AIRES TO FINLAND, FROM SOUTH AFRICA TO MELBOURNE TO CHINA LIKEWISE, FOCUS ON THE FAMILY ALSO BROADCASTS 90 SECOND TELEVISION FEATURES THAT BRING INSIGHTFUL COMMENTARY FROM DR BILL MAIER TO MAINSTREAM, MAJOR NETWORK TELEVISION AFFILIATES ACROSS THE UNITED STATES SEE SCHEDULE O FOR MORE DETAIL ON EACH BROADCAST

**4b** (Code ) (Expenses \$ 15,456,107 including grants of \$ 586 ) (Revenue \$ 69,530 )  
 PUBLICATIONS-FOCUS ON THE FAMILY DISTRIBUTES MANY MONTHLY AND BI-MONTHLY MAGAZINES AND NEWSLETTERS FOR EXAMPLE, THRIVING FAMILY, WHICH CONSISTS OF ARTICLES TO REINFORCE OUR CORE MARRIAGE AND PARENTING MESSAGE, MAELS 300,000 COPIES ON A REGULAR BASIS FOCUS ON THE FAMILY REACHES MANY SPECIFIC INTERESTS AND AGES THROUGH ITS PUBLICATIONS SEE SCHEDULE O FOR MORE DETAIL ON EACH PERIODICAL/PUBLICATION

**4c** (Code ) (Expenses \$ 15,082,042 including grants of \$ 1,403 ) (Revenue \$ )  
 CORRESPONDENCE-DURING THE FISCAL YEAR ENDED SEPTEMBER 30, 2010, FOCUS ON THE FAMILY ANSWERED LETTERS, E-MAILS, WEBSITE CONTACTS, AND TELEPHONE CALLS, EACH OF WHICH CAME SEEKING A SPECIFIC RESPONSE TO A UNIQUE REQUEST OR A QUESTION ABOUT RELATIONSHIPS AND FAMILY LIFE THIS DIRECT COMMUNICATION IS A VITAL LINK TO THE PEOPLE WE DESIRE TO SERVE THE MANY INQUIRIES FOR INFORMATION, ADVICE, AND ENCOURAGEMENT ARE FIELDIED BY AN EXPERT STAFF OF OVER 73, MANY OF WHICH HOLD EARNED DEGREES

**4d** Other program services (Describe in Schedule O ) **See also Additional Data for Description**  
 (Expenses \$ 53,343,650 including grants of \$ 3,526,214 ) (Revenue \$ 9,686,805 )

**4e Total program service expenses** \$ 102,489,426

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Question text, and Yes/No response columns. Rows 1-20 cover various organizational requirements and reporting obligations.

**Part IV Checklist of Required Schedules** *(continued)*

<b>21</b>	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? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . . <input checked="" type="checkbox"/>	<b>21</b>	Yes	
<b>22</b>	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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . . <input checked="" type="checkbox"/>	<b>22</b>	Yes	
<b>23</b>	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . . <input checked="" type="checkbox"/>	<b>23</b>	Yes	
<b>24a</b>	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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i> . . . . .	<b>24a</b>		No
<b>b</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .	<b>24b</b>		
<b>c</b>	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	<b>24c</b>		
<b>d</b>	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .	<b>24d</b>		
<b>25a</b>	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . . <input checked="" type="checkbox"/>	<b>25a</b>		No
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> . . . . . <input checked="" type="checkbox"/>	<b>25b</b>		No
<b>26</b>	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? <i>If "Yes," complete Schedule L, Part II</i> . . . . . <input checked="" type="checkbox"/>	<b>26</b>		No
<b>27</b>	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? <i>If "Yes," complete Schedule L, Part III</i> . . . . . <input checked="" type="checkbox"/>	<b>27</b>		No
<b>28</b>	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)			
<b>a</b>	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . . <input checked="" type="checkbox"/>	<b>28a</b>		No
<b>b</b>	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . . <input checked="" type="checkbox"/>	<b>28b</b>	Yes	
<b>c</b>	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 owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . . <input checked="" type="checkbox"/>	<b>28c</b>	Yes	
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> <input checked="" type="checkbox"/>	<b>29</b>	Yes	
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . . <input checked="" type="checkbox"/>	<b>30</b>		No
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . . <input checked="" type="checkbox"/>	<b>31</b>		No
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	<b>32</b>		No
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . . <input checked="" type="checkbox"/>	<b>33</b>		No
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . . <input checked="" type="checkbox"/>	<b>34</b>	Yes	
<b>35</b>	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . . <input checked="" type="checkbox"/>	<b>35</b>		No
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . . <input checked="" type="checkbox"/>	<b>36</b>	Yes	
<b>37</b>	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? <i>If "Yes," complete Schedule R, Part VI</i> <input checked="" type="checkbox"/>	<b>37</b>		No
<b>38</b>	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	<b>38</b>	Yes	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable . . . . .		
	<b>1a</b> 500		
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	<b>1b</b> 0		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	Yes	
<b>2a</b>	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return . . . . .		
	<b>2a</b> 1,150		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	Yes	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	Yes	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	Yes	
<b>4a</b>	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)? . . . . .		No
<b>b</b>	If "Yes," enter the name of the foreign country <input type="checkbox"/> _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .		No
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . . .		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? . . . . .		No
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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? . . . . .	Yes	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	Yes	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .		No
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .		
	<b>7d</b>		
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .		No
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .		No
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .		
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966? . . . . .		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter		
<b>a</b>	Gross income from members or shareholders . . . . .	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body . . . . .		
<b>1b</b>	Enter the number of voting members that are independent . . . . .		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .		No
<b>3</b>	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? . . . . .		No
<b>4</b>	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		No
<b>5</b>	Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .		No
<b>6</b>	Does the organization have members or stockholders? . . . . .		No
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .		No
<b>7b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .		No
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
<b>8a</b>	The governing body? . . . . .	Yes	
<b>8b</b>	Each committee with authority to act on behalf of the governing body? . . . . .	Yes	
<b>9</b>	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 . . . . .		No

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Does the organization have local chapters, branches, or affiliates? . . . . .		No
<b>10b</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? . . . . .		
<b>11</b>	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	Yes	
<b>11A</b>	Describe in Schedule O the process, if any, used by the organization to review the Form 990 . . . . .		
<b>12a</b>	Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	Yes	
<b>12b</b>	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	Yes	
<b>12c</b>	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	Yes	
<b>13</b>	Does the organization have a written whistleblower policy? . . . . .	Yes	
<b>14</b>	Does the organization have a written document retention and destruction policy? . . . . .	Yes	
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official . . . . .	Yes	
<b>15b</b>	Other officers or key employees of the organization . . . . .	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions )		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	Yes	
<b>16b</b>	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .	Yes	

**Section C. Disclosure**

<b>17</b>	List the States with which a copy of this Form 990 is required to be filed <b>AL, AZ, CA, CO, DC, FL, GA, IN, MD, MN, NH, TN, VA, WV, WA, WI</b>
<b>18</b>	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
<b>19</b>	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
<b>20</b>	State the name, physical address, and telephone number of the person who possesses the books and records of the organization <b>FOCUS ON THE FAMILY 8605 EXPLORER DRIVE COLORADO SPRINGS, CO 809201049 (719) 531-3400</b>



<b>1b Total</b>	977,035	517,624	161,601
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**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **▶**31

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
CSK Strategic Marketing Group Inc 19 S Tejon St Ste 400 Colorado Springs, CO 80903	Marketing Services	2,499,563
MasterWorks 19462 Powder Hill Pl NE Poulsbo, WA 98370	Fundraising Consultant	1,462,234
HOLLAND & KNIGHT PO BOX 864084 Orlando, FL 32886	Legal Services	748,970
Panorama Consulting Group LLC 4949 S Syracuse St Ste 500 Denver, CO 80237	Computer Consulting	657,203
Jellyfish Media LLC 401 S Carlton Ave Ste 200 Wheaton, IL 60187	Multimedia and Internet	632,757

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶**16

**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b>	Federated campaigns . . . . . <b>1a</b>					
	<b>b</b>	Membership dues . . . . . <b>1b</b>					
	<b>c</b>	Fundraising events . . . . . <b>1c</b>					
	<b>d</b>	Related organizations . . . . . <b>1d</b>					
	<b>e</b>	Government grants (contributions) <b>1e</b>					
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above <b>1f</b>	97,088,339				
	<b>g</b>	Noncash contributions included in lines 1a-1f \$ 1,906,123					
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . . ▶	97,088,339				
<b>Program Service Revenue</b>	<b>2a</b>	ROYALTIES & LICENSING	900,099	1,948,727	1,948,727		
	<b>b</b>	FOCUS LEADERSHIP INSTI	611,600	1,029,968	1,029,968		
	<b>c</b>	EVENT REVENUE	900,099	1,008,117	1,008,117		
	<b>d</b>	SOLID ANSWERS	511,190	69,530	69,530		
	<b>e</b>						
	<b>f</b>	All other program service revenue					
	<b>g</b>	<b>Total.</b> Add lines 2a-2f . . . . . ▶	4,056,342				
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest and other similar amounts) . . . . . ▶		20,285		20,285	
	<b>4</b>	Income from investment of tax-exempt bond proceeds . . ▶					
	<b>5</b>	Royalties . . . . . ▶					
	<b>6a</b>	Gross Rents	(i) Real	16,847			
			(ii) Personal				
			Less rental expenses				
			Rental income or (loss)	16,847			
	<b>d</b>	Net rental income or (loss) . . . . . ▶		16,847	10,675	6,172	
	<b>7a</b>	Gross amount from sales of assets other than inventory	(i) Securities	1,686,268			
			(ii) Other		245,969		
			Less cost or other basis and sales expenses	1,693,480		256,354	
			Gain or (loss)	-7,212		-10,385	
<b>d</b>	Net gain or (loss) . . . . . ▶		-17,597		-17,597		
<b>8a</b>	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . . <b>a</b>						
<b>b</b>	Less direct expenses . . . . . <b>b</b>						
<b>c</b>	Net income or (loss) from fundraising events . . ▶						
<b>9a</b>	Gross income from gaming activities See Part IV, line 19 . . . . . <b>a</b>						
<b>b</b>	Less direct expenses . . . . . <b>b</b>						
<b>c</b>	Net income or (loss) from gaming activities . . ▶						
<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . . <b>a</b>						
			7,323,288				
		Less cost of goods sold . . . . . <b>b</b>	1,870,110				
<b>c</b>	Net income or (loss) from sales of inventory . . ▶		5,453,178	5,453,178			
Miscellaneous Revenue		Business Code					
<b>11a</b>	FOFA REIMBURSEMENT	900,099	1,465,457	1,465,457			
<b>b</b>	ADVERTISING	541,800	517,135		517,135		
<b>c</b>	MISCELLANEOUS	900,099	473,819	246,815	227,004		
<b>d</b>	All other revenue . . . . .		60,125		60,125		
<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . . ▶		2,516,536				
<b>12</b>	<b>Total revenue.</b> See Instructions . . . . . ▶		109,133,930	11,232,467	583,432	229,692	

**Part IX Statement of Functional Expenses**

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b>	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	1,206,656	1,206,656		
<b>2</b>	Grants and other assistance to individuals in the U S See Part IV, line 22	18,750	18,750		
<b>3</b>	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	2,632,392	2,632,392		
<b>4</b>	Benefits paid to or for members				
<b>5</b>	Compensation of current officers, directors, trustees, and key employees . . . . .	1,092,864	897,164	116,158	79,542
<b>6</b>	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	96,924	79,384	10,469	7,071
<b>7</b>	Other salaries and wages	43,693,270	35,785,873	4,719,731	3,187,666
<b>8</b>	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	1,201,569	1,201,569		
<b>9</b>	Other employee benefits . . . . .	7,276,445	5,676,346	899,923	700,176
<b>10</b>	Payroll taxes . . . . .	2,968,999	2,466,556	261,526	240,917
<b>11</b>	Fees for services (non-employees)				
<b>a</b>	Management . . . . .	60,000		60,000	
<b>b</b>	Legal . . . . .	831,770	105,950	725,820	
<b>c</b>	Accounting . . . . .	64,775		64,775	
<b>d</b>	Lobbying . . . . .				
<b>e</b>	Professional fundraising See Part IV, line 17 . . . . .	587,015			587,015
<b>f</b>	Investment management fees . . . . .	20,583		20,583	
<b>g</b>	Other . . . . .	8,115,782	7,371,328	270,028	474,426
<b>12</b>	Advertising and promotion . . . . .	3,236,342	3,141,626	7,997	86,719
<b>13</b>	Office expenses . . . . .	1,320,251	1,099,164	74,396	146,691
<b>14</b>	Information technology . . . . .	3,642,872	3,452,810	332	189,730
<b>15</b>	Royalties . . . . .	1,467,855	1,462,838	4,787	230
<b>16</b>	Occupancy . . . . .	3,180,356	2,866,907	230,336	83,113
<b>17</b>	Travel . . . . .	1,526,695	876,755	115,045	534,895
<b>18</b>	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
<b>19</b>	Conferences, conventions, and meetings . . . . .	649,654	632,349	2,780	14,525
<b>20</b>	Interest . . . . .				
<b>21</b>	Payments to affiliates . . . . .				
<b>22</b>	Depreciation, depletion, and amortization . . . . .	9,108,630	8,731,107	152,594	224,929
<b>23</b>	Insurance . . . . .	244,602		244,602	
<b>24</b>	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
<b>a</b>	RADIO, TV & FILM	15,220,089	15,091,608		128,481
<b>b</b>	Printing & Publications	4,164,882	2,739,811	261,888	1,163,183
<b>c</b>	Postage & Shipping	3,886,900	2,753,629	185,965	947,306
<b>d</b>	BENEVOLENCE	1,124,987	1,124,987		
<b>e</b>	Misc Project Developmen	166,435	165,707	728	
<b>f</b>	All other expenses	2,730,182	908,160	533,520	1,288,502
<b>25</b>	<b>Total functional expenses.</b> Add lines 1 through 24f	121,538,526	102,489,426	8,963,983	10,085,117
<b>26</b>	<b>Joint costs.</b> Check here <input checked="" type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	13,974,876	12,347,870	0	1,627,006

**Part X Balance Sheet**

		(A)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	5,500	<b>1</b>	5,500
	<b>2</b> Savings and temporary cash investments . . . . .	22,241,092	<b>2</b>	14,090,595
	<b>3</b> Pledges and grants receivable, net . . . . .	1,087,194	<b>3</b>	1,009,882
	<b>4</b> Accounts receivable, net . . . . .	1,058,643	<b>4</b>	912,693
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .	487,343	<b>8</b>	309,628
	<b>9</b> Prepaid expenses and deferred charges . . . . .	2,506,481	<b>9</b>	2,723,215
	<b>10a</b> Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D . . . . .	106,721,357		
	<b>b</b> Less accumulated depreciation . . . . .	64,138,658	<b>10c</b>	42,582,699
	<b>11</b> Investments—publicly traded securities . . . . .	18,672	<b>11</b>	6,171
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .	5,586,198	<b>12</b>	5,464,667
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	11,411,018	<b>15</b>	12,720,333
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	90,996,703	<b>16</b>	79,825,383	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	9,527,596	<b>17</b>	10,053,007
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	2,200,696	<b>19</b>	3,006,860
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> Other liabilities. Complete Part X of Schedule D . . . . .	3,684,947	<b>25</b>	3,586,648
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	15,413,239	<b>26</b>	16,646,515
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	71,970,779	<b>27</b>	60,872,278
	<b>28</b> Temporarily restricted net assets . . . . .	3,521,685	<b>28</b>	2,215,590
	<b>29</b> Permanently restricted net assets . . . . .	91,000	<b>29</b>	91,000
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .	75,583,464	<b>33</b>	63,178,868	
<b>34</b> Total liabilities and net assets/fund balances . . . . .	90,996,703	<b>34</b>	79,825,383	

**Part XI Financial Statements and Reporting**

**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 Schedule O

**2a** Were the organization's financial statements compiled or reviewed by an independent accountant? . . .

**b** Were the organization's financial statements audited by an independent accountant? . . . . .

**c** If "Yes," to 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?  
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O . . . .

**d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both  
 Separate basis  Consolidated basis  Both consolidated and separated basis

**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? . . . . .

**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 . . .

	Yes	No
<b>2a</b>		No
<b>2b</b>	Yes	
<b>2c</b>	Yes	
<b>3a</b>		No
<b>3b</b>		

SCHEDULE A (Form 990 or 990EZ)

Public Charity Status and Public Support

2009

Open to Public Inspection

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.

Department of the Treasury Internal Revenue Service

Name of the organization FOCUS ON THE FAMILY

Employer identification number

95-3188150

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

- 1 A church, convention of churches, or association of churches section 170(b)(1)(A)(i).
2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E )
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 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
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II )
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II )
8 A community trust described in section 170(b)(1)(A)(vi) (Complete Part II )
9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III )
10 An organization organized and operated exclusively to test for public safety See section 509(a)(4).
11 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
a Type I b Type II c Type III - Functionally integrated d Type III - Other
e By 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)
f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?
(ii) a family member of a person described in (i) above?
(iii) a 35% controlled entity of a person described in (i) or (ii) above?
h Provide the following information about the supported organization(s)

Table with 2 columns: Yes, No. Rows: 11g(i), 11g(ii), 11g(iii)

Table with 7 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization in col (i) listed in your governing document?, (v) Did you notify the organization in col (i) of your support?, (vi) Is the organization in col (i) organized in the U S?, (vii) Amount of support?

**Part II Support Schedule for Organizations Described in IRC 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**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
<b>6 Public Support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income (Explain in Part IV ) Do not include gain or loss from the sale of capital assets						
<b>11 Total support</b> (Add lines 7 through 10)						

**12** Gross receipts from related activities, etc (See instructions ) 12

**13 First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

**14** Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) 14

**15** Public Support Percentage for 2008 Schedule A, Part II, line 14 15

**16a 33 1/3% support test—2009.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

**b 33 1/3% support test—2008.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

**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

**18 Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

**Part III Support Schedule for Organizations Described in IRC 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	126,893,000	128,470,889	133,267,216	119,675,188	97,088,339	605,394,632
<b>2</b> 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	7,232,541	8,456,241	9,064,763	9,637,723	9,430,903	43,822,171
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5	134,125,541	136,927,130	142,331,979	129,312,911	106,519,242	649,216,803
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons	100,986	1,053,617	1,279,708	1,007,329	417,361	3,859,001
<b>b</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	2,943,334					2,943,334
<b>c</b> Add lines 7a and 7b	3,044,320	1,053,617	1,279,708	1,007,329	417,361	6,802,335
<b>8 Public Support</b> (Subtract line 7c from line 6)						642,414,468

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6	134,125,541	136,927,130	142,331,979	129,312,911	106,519,242	649,216,803
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,925,353	3,972,153	2,063,050	1,808,130	2,212,863	13,981,549
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b	3,925,353	3,972,153	2,063,050	1,808,130	2,212,863	13,981,549
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	3,633,113	3,871,141	3,169,460	2,020,049	1,712,272	14,406,035
<b>13 Total support</b> (Add lines 9, 10c, 11 and 12)	141,684,007	144,770,424	147,564,489	133,141,090	110,444,377	677,604,387
<b>14 First Five Years</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b> <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	<b>15</b>	94.810%
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15	<b>16</b>	94.550%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2009</b> (line 10c column (f) divided by line 13 column (f))	<b>17</b>	2.060%
<b>18</b> Investment income percentage from <b>2008</b> Schedule A, Part III, line 17	<b>18</b>	1.840%

**19a 33 1/3% support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

**b 33 1/3% support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

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**Part IV** **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

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**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group
- B** Check  if the filing organization checked box A and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)	(a) Filing Organization's Totals	(b) Affiliated Group Totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)	34,114													
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)	34,114													
<b>d</b> Other exempt purpose expenditures	111,419,295													
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)	111,453,409													
<b>f</b> Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 30%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>			If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000													
Over \$17,000,000	\$1,000,000													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
<b>h</b> Subtract line 1g from line 1a If zero or less, enter -0-	0													
<b>i</b> Subtract line 1f from line 1c If zero or less, enter -0-	0													
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> 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.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
<b>2a</b> Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
<b>c</b> Total lobbying expenditures	101,902	592,110	224,641	34,114	952,767
<b>d</b> Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
<b>f</b> Grassroots lobbying expenditures		21,987			21,987

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

	(a)		(b)
	Yes	No	Amount
<b>1</b> 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			
<b>a</b> Volunteers?			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b> Media advertisements?			
<b>d</b> Mailings to members, legislators, or the public?			
<b>e</b> Publications, or published or broadcast statements?			
<b>f</b> Grants to other organizations for lobbying purposes?			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>i</b> Other activities? If "Yes," describe in Part IV			
<b>j</b> Total lines 1c through 1i			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> 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).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b>	
<b>3</b> Did the organization agree to carryover lobbying and political expenditures from the prior year?	<b>3</b>	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".**

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>	
<b>2</b> Section 162(e) non-deductible lobbying and political expenditures ( <b>do not include amounts of political expenses for which the section 527(f) tax was paid</b> ).		
<b>a</b> Current year	<b>2a</b>	
<b>b</b> Carryover from last year	<b>2b</b>	
<b>c</b> Total	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	
<b>4</b> 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?	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)	<b>5</b>	

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2009

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization FOCUS ON THE FAMILY

Employer identification number 95-3188150

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4: Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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?

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of a certified historic structure.

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

- a Total number of conservation easements
b Total acreage restricted by conservation easements
c Number of conservation easements on a certified historic structure included in (a)
d Number of conservation easements included in (c) acquired after 8/17/06

Table with 2 columns: Held at the End of the Year. Rows 2a, 2b, 2c, 2d.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?
9 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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. 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; (ii) Assets included in Form 990, Part X
2 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: a Revenues included in Form 990, Part VIII, line 1; b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a Public exhibition, b Scholarly research, c Preservation for future generations, d Loan or exchange programs, e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

Table with 6 columns: (a) Current Year, (b) Prior Year, (c) Two Years Back, (d) Three Years Back, (e) Four Years Back. Rows: 1a Beginning of year balance, b Contributions, c Investment earnings or losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment, b Permanent endowment 100.000%, c Term endowment

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

Table with 3 columns: Description, Yes, No. Rows: 3a(i) unrelated organizations, 3a(ii) related organizations, 3b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Table with 5 columns: Description of investment, (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)



**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

<b>1</b>	Total revenue (Form 990, Part VIII, column (A), line 12)	<b>1</b>	109,133,930
<b>2</b>	Total expenses (Form 990, Part IX, column (A), line 25)	<b>2</b>	121,538,526
<b>3</b>	Excess or (deficit) for the year Subtract line 2 from line 1	<b>3</b>	-12,404,596
<b>4</b>	Net unrealized gains (losses) on investments	<b>4</b>	
<b>5</b>	Donated services and use of facilities	<b>5</b>	
<b>6</b>	Investment expenses	<b>6</b>	
<b>7</b>	Prior period adjustments	<b>7</b>	
<b>8</b>	Other (Describe in Part XIV)	<b>8</b>	
<b>9</b>	Total adjustments (net) Add lines 4 - 8	<b>9</b>	0
<b>10</b>	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	<b>10</b>	-12,404,596

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	111,004,040
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains on investments . . . . .	<b>2a</b>	
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV) . . . . .	<b>2d</b>	1,870,110
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	1,870,110
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	109,133,930
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIV) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	0
<b>5</b>	Total Revenue Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	109,133,930

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	123,408,636
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV) . . . . .	<b>2d</b>	1,870,110
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	1,870,110
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	121,538,526
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIV) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	0
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	121,538,526

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
Part III, Line 4		Paintings and sculptures created by Christian artists are on display throughout the organization's buildings. These works of art reflect the artist's expression of the beauty of God's creation and the expression of God's love in our relationships with him and other Christians.
Part V, Line 4	Description of Intended Use of Endowment Funds	This is a permanent endowment with no restriction on the use of any earned income. The end of year balance indicated on Schedule D, Part V, Line 1g, consists of a permanent endowment of \$91,000 (also classified as permanently restricted net assets on Form 990, Part X, Line 29) and accumulated undesignated endowment earnings of \$23,758.
Part X	Description of Uncertain Tax Positions Under FIN 48	As of September 30, 2010, Focus had no uncertain tax positions that qualify for recognition or disclosure in the consolidated financial statements.
		Description of amount included on Part XII, Line 1, but not on Form 990, Part VIII, Line 12 - Part XII, Line 2d - Cost of Goods Sold
		Description of amount included on Part XIII, Line 1, but not on Form 990, Part IX, Line 25 - Part XIII, Line 2d - Cost of Goods Sold

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No 1545-0047

**2009**

**Open to Public  
Inspection**

▶ Complete if the organization answered "Yes" to Form 990,  
Part IV, line 14b, 15, or 16.  
▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
FOCUS ON THE FAMILY

**Employer identification number**

95-3188150

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

**1 For grantmakers.** 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**  **No**

**2 For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

**3** Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (ie, 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
Central America and the Caribbean			Program services	Counseling services & seminars, broadcasting activities	1,010,663
East Asia and the Pacific			Program services	Character training & Radio Broadcasting activities	803,780
Europe			Program services	Character training, Worldview seminars, Marriage & Parenting programs, and Radio broadcasts	95,215
Middle East and North Africa			Program services & fundraising	Character training, Worldview seminars, Translation of materials, and Fundraising activities	230,805
North America			Program services	Marriage & Parenting programs	92,470
South Asia			Program services	Character training and Worldview seminars	197,305
Sub-Saharan Africa			Program services & Fundraising	Character training, Worldview seminars and fundraising activities	352,154
<b>Totals . . . . . ▶</b>	0	0			2,782,392

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 . . . . .   
 Use Schedule F-1 (Form 990) if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central America and the Caribbean	Counseling services & seminars, broadcasting activities	539,413	Electronic fund or wire transfer			Book
		Central America and the Caribbean	Spanish Radio Production	225,000	Electronic fund or wire transfer			Book
		East Asia and the Pacific	Character training	192,188	Electronic fund or wire transfer			Book
		East Asia and the Pacific	Character training, regional trips and conferences	110,091	Electronic fund or wire transfer			Book
		East Asia and the Pacific	Character training	263,000	Electronic fund or wire transfer			Book
		East Asia and the Pacific	Character training & Radio Broadcasting activities	125,304	Electronic fund or wire transfer			Book
		East Asia and the Pacific	Character training	43,197	Electronic fund or wire transfer			Book
		East Asia and the Pacific	Relief Aid - Chinese heart surgery	20,000	Electronic fund or wire transfer			Book
		Europe	Character training, Worldview seminars, Marriage & Parenting programs, radio broadcasts, regional trips and conferences	95,215	Electronic fund or wire transfer			Book
		Middle East and North Africa	Character training, Worldview seminars, Translation of materials, regional trips and conferences	230,805	Electronic fund or wire transfer			Book
		North America	Marriage & Parenting programs, regional trips and conferences	92,470	Electronic fund or wire transfer			Book
		South Asia	Character training, Worldview seminars, regional trips and conferences	197,305	Electronic fund or wire transfer			Book
		Sub-Saharan Africa	Character training, Worldview seminars, Fundraising activities, regional trips and conferences	252,154	Electronic fund or wire transfer			Book
		East Asia and the Pacific	Adoption / Orphan Care programs	50,000	Electronic fund or wire transfer			Book
		Sub-Saharan Africa	Adoption / Orphan Care programs	100,000	Electronic fund or wire transfer			Book
		Central America and the Caribbean	Involvement in the creation of Secretary for Family Affairs	246,250	Electronic fund or wire transfer			Book

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . .  16

3 Enter total number of other organizations or entities . . . . .  0







**Part III Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		(event type)	(event type)	(total number)	(Add col (a) through col (c))
<b>Revenue</b>	<b>1</b> Gross receipts . . . . .				
	<b>2</b> Less Charitable contributions . . . . .				
	<b>3</b> Gross income (line 1 minus line 2) . . . . .				
<b>Direct Expenses</b>	<b>4</b> Cash prizes . . . . .				
	<b>5</b> Non-cash prizes . . . . .				
	<b>6</b> Rent/facility costs . . . . .				
	<b>7</b> Food and beverages . . . . .				
	<b>8</b> Entertainment . . . . .				
	<b>9</b> Other direct expenses . . . . .				
	<b>10</b> Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶				
	<b>11</b> Net income summary Combine lines 3, column d, and line 10. . . . . ▶				

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
<b>Revenue</b>	<b>1</b> Gross revenue . . . . .				
<b>Direct Expenses</b>	<b>2</b> Cash prizes . . . . .				
	<b>3</b> Non-cash prizes . . . . .				
	<b>4</b> Rent/facility costs . . . . .				
	<b>5</b> Other direct expenses . . . . .				
	<b>6</b> Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
<b>7</b> Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶					
<b>8</b> Net gaming income summary Combine lines 1, column d, and line 7 . . . . . ▶					

	Yes	No
<b>9</b> Enter the state(s) in which the organization operates gaming activities _____		
<b>a</b> Is the organization licensed to operate gaming activities in each of these states? . . . . .	<b>9a</b>	
<b>b</b> If "No," Explain _____		
<b>10a</b> Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	<b>10a</b>	
<b>b</b> If "Yes," Explain _____		
<b>11</b> Does the organization operate gaming activities with nonmembers? . . . . .	<b>11</b>	
<b>12</b> Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . .	<b>12</b>	

		Yes	No
<b>13</b> Indicate the percentage of gaming activity operated in			
<b>a</b> The organization's facility . . . . .	<b>13a</b>		
<b>b</b> An outside facility . . . . .	<b>13b</b>		
<b>14</b> Enter the name and address of the person who prepares the organization's gaming/special events books and records			
Name ▶ _____			
Address ▶ _____			
<b>15a</b> Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . .		<b>15a</b>	
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____			
<b>c</b> If "Yes," enter name and address			
Name ▶ _____			
Address ▶ _____			
<b>16</b> Gaming manager information			
Name ▶ _____			
Gaming manager compensation ▶ \$ _____			
Description of services provided ▶ _____			
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
<b>17</b> Mandatory distributions			
<b>a</b> Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . .		<b>17a</b>	
<b>b</b> Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____			

**Software ID:**  
**Software Version:**  
**EIN:** 95-3188150  
**Name:** FOCUS ON THE FAMILY

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Alaska Family Action PO Box 231425 Anchorage, AK 99523	20-5158717	501(c)(4)	5,000	167	Book	Internet service assistance	Assist with parents rights state efforts
South Dakota Family Policy Council PO Box 88007 Sioux Falls, SD 57109	46-0408040	501(c)(3)	16,053	792	Book	Internet service assistance	Assist with polling on cloning ban
Stand 4 Marriage DC 1100 H St NW Ste 700 Washington DC, DC 20005	27-0246039	501(c)(4)	40,000		book		Assist with efforts regarding gay marriage
StandforMarriageMainecom PO Box 15322 Portland, ME 04112	27-0267465	501(c)(4)	10,000		Book		Assist with state marriage effort
Pregnancy Counseling Center 10211 Sepulveda Boulevard Mission Hills, CA 91345	95-4645816	501(c)(3)		26,576	Purchase price	Ultrasound machine	To provide ultrasound equipment for pregnancy medical care
Community Pregnancy Center 3315 Amaden Expressway Suite 25 San Jose, CA 95118	94-2820673	501(c)(3)	14,900		Book		Ultrasound training
Care Net Pregnancy Resource Ctr of Chilton CO Inc 1622 7th Street N Suite 132 Clanton, AL 35045	72-1598399	501(c)(3)		26,576	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Fort Worth Pregnancy Center PO Box 11437 Fort Worth, TX 76110	72-2548774	501(c)(3)		26,576	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Dallas Pregnancy Resource Center 6500 Greenville Ave Suite 405 Dallas, TX 75206	75-1853520	501(c)(3)		26,576	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
PDHC West Office 1590 E Main St Lancaster, OH 43130	31-1002913	501(c)(3)		26,576	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hope pregnancy center 716 N Broad St Philadelphia, PA 19130	26-2676655	501(c)(3)	9,300		Book		ultrasound training
Life line pregnancy center 925 South Kerr Ave Suite M Wilmington, NC 28403	58-1634141	501(c)(3)	14,900		Book		Ultrasound training
Choices Pregnancy Center 626 Fifth Ave Coraopolis, PA 15108	25-1528068	501(c)(3)		26,576	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
The College Women's Center 235 E Ponce De Leon Decatur, GA 30030	58-2424267	501(c)(3)		26,576	Purchase price	Ultrasound equipment	To provide ultrasound machine for pregnancy medical care
The Pregnancy Resource Center of the New River Valley 708 North Main St Suite 200 Blacksburg, VA 24060	52-1404868	501(c)(3)		26,576	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Life Choices University Plaza 3929 E 7th Joplin, MO 64801	43-1518912	501(c)(3)		20,269	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Zoe Women's Services 1216 Lincoln C Livingston, MT 59715	81-0466507	501(c)(3)		20,360	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Parkridge Pregnancy Center 5203 79th Street Suite B Lubbock, TX 79424	56-2299912	501(c)(3)		26,576	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Pregnancy Care Center of Tift Area PO Box 7186 104 8th St Bldg 2 Tifton, GA 31793	58-1636818	501(c)(3)		20,360	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Options 360 Pregnancy Clinic 1706 W Main St Ste 115 Vancouver, WA 98604	27-0059405	501(c)(3)		20,360	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Pagosa Pregnancy Support Center PO Box 5437 Pagosa Springs, CO 81147	84-1393680	501(c)(3)		20,360	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Daybreak Pregnancy Resource Center 101 Tremont St Suite 414 Boston, MA 02108	22-2474290	501(c)(3)	9,300		book		Ultrasound Training
Care Net Pregnancy Resource Center of Atlanta 100 Edgewood Ave Ste 1650 Atlanta, GA 30303	20-0478411	501(c)(3)	9,300		Book		Ultrasound training
Life Choices Inc 5575 Raleigh LaGrange Memphis, TN 38124	62-1281799	501(c)(3)		20,360	Purchase price	Ultrasound equipment	To provide ultrasound machine for pregnancy medical care
Living Alternatives A Crisis Pregnancy Center 1780 W Merchant Kankakee, IL 60901	37-1182626	501(c)(3)		26,576	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Living Alternatives A Crisis Pregnancy Center 53 S Central Park Plaza Jacksonville, IL 60901	37-1182626	501(c)(3)		26,576	purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Hope Resource Center 813 W 6th St Pine Bluff, AR 71601	71-0286519	501(c)(3)		26,576	purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Pregnancy Resource Center of Helena 1205 Butte Avenue Suite 2 Helena, MT 59601	26-1339005	501(c)(3)		20,268	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Lifeline Pregnancy Resource Center PO Box 663 Kirksville, MO 63501	43-1773653	501(c)(3)		17,768	Purchase price	ultrasound machine	To provide ultrasound machine for pregnancy medical care
Lee Women's Center 8890 SalRose Lane Suite 240 Fort Myers, FL 33912	65-0339338	501(c)(3)		17,768	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
First Choice Pregnancy Center 2104 Del Prado Blvd S Suite 3 Cape Coral, FL 33990	65-0339338	501(c)(3)	9,600		book		Ultrasound training
Living Alternatives A Crisis Pregnancy Center 1429 Plainfield Rd Joliet, IL 60435	37-1182626	501(c)(3)		26,576	purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Salem Pregnancy Resource Center 2630 Market St NE Salem, OR 97304	94-3076587	501(c)(3)		20,269	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Options Pregnancy Resource Centers 409 1st Avenue West Albany, OR 97322	93-0919233	501(c)(3)		20,788	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
AIM Pregnancy Help Center 248 N 5th Street Steubenville, OH 43952	34-1567102	501(c)(3)	9,600		Book		Ultrasound training
Hope Pregnancy center 716 N Broad St Philadelphia, PA 19130	23-2676655	501(c)(3)		21,040	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Center for Military Readiness PO Box 51600 Livonia, MI 48151	38-3043093	501(c)(3)	12,000		Book		Funds to assist in ongoing efforts
Heart Reach Pregnancy Center 924 Leatherleaf Loop Wasilla, AK 99654	92-0115423	501(c)(3)		16,165	purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
CARE NET PREGNANCY CENTER OF LEHIGH VALLEY 1034 Hamilton Street Allentown, PA 18101	23-2185001	501(c)(3)		16,180	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Care Net Pregnancy Center of LeHigh Valley 541 E Broad Street Bethlehem, PA 18018	23-2185001	501(c)(3)		21,040	purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Alight Pregnancy Center 192 Fairview Ave Hudson, NY 12534	14-1742767	501(c)(3)		21,040	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Care Net Pregnancy Resource Center 1107 Mt Rushmore Road 3 Rapid City, SD 57701	36-3371919	501(c)(3)	9,600		Book		Ultrasound training
Hopeline Pregnancy Resource Center 4749 Main Street Bridgeport, CT 06606	06-1336310	501(c)(3)		26,576	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Women's Care Center Rhea County 285 Main Street Dayton, TN 37321	58-1767813	501(c)(3)		17,768	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Compassion Pregnancy Center Inc 37540 Gratiot Ste 100 Clinton Township, MI 48036	38-3130795	501(c)(3)	14,900		Book		Ultrasound training
Birth Right Women's Resource Center 391 Wallace Road Trenton, TN 38305	62-1613447	501(c)(3)		17,768	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Pregnancy Resource Center of Lodi 942 E Pine Street Lodi, CA 95240	68-0299482	501(c)(3)		20,788	Purchase price	Ultrasound machine	To provide ultrasound machine for pregnancy medical care
Alternatives Pregnancy Resource Center 2628 El Camino Avenue Ste B-1 Scramento, CA 95821	94-2844514	501(c)(3)	14,900		Book		Ultrasound training
Haven of Hope Pregnancy Center 1100 Olive St PO Box 645 Benton, KY 45052	31-1547451	501(c)(3)	14,900		Book		Ultrasound training
Compassion Pregnancy Center 70 Highland Street Worcester, MA 01609	04-3532986	501(c)(3)	9,300		Book		Ultrasound training

**Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Labor of Love Pregnancy Resource Center 204 Church Ave Oshkosh, WI 54901	39-1783119	501(c)(3)	9,600		Book		Ultrasound training
Breakpoint Worldview Magazine PO Box 1550 Merrifield, VA 22116	62-0988244	501(c)(3)	25,000		Book		Assist with ongoing efforts

**Schedule J**  
(Form 990)

**Compensation Information**

OMB No 1545-0047

**2009**

**Open to Public Inspection**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
FOCUS ON THE FAMILY

Employer identification number

95-3188150

**Part I Questions Regarding Compensation**

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items
- |   |  |
|---|--|
| <input checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions         | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax idemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account           | <input type="checkbox"/> Personal services (e g , maid, chauffeur, chef) |

**b** If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee          | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant        | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?  
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

**Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.**

**5** For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

- a** The organization?
- b** Any related organization?  
If "Yes," to line 5a or 5b, describe in Part III

**6** For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

- a** The organization?
- b** Any related organization?  
If "Yes," to line 6a or 6b, describe in Part III

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

	Yes	No
<b>1b</b>	Yes	
<b>2</b>	Yes	
<b>4a</b>		No
<b>4b</b>		No
<b>4c</b>		No
<b>5a</b>		No
<b>5b</b>		No
<b>6a</b>	Yes	
<b>6b</b>		No
<b>7</b>		No
<b>8</b>		No
<b>9</b>		

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
JAMES D DALY	(i)	0	0	0	0	0	0	0
	(ii)	221,347	5,881	2,365	8,567	13,866	252,026	0
WADE D CROW	(i)	0	0	0	0	0	0	0
	(ii)	143,519	217	1,145	3,346	13,854	162,081	0
BUFORD D TACKETT III	(i)	144,227	0	1,685	5,320	4,928	156,160	0
	(ii)	0	0	0	0	0	0	0
GLENN A WILLIAMS	(i)	156,017	26,389	1,943	5,782	13,866	203,997	0
	(ii)	0	0	0	0	0	0	0
Clark Miller	(i)	140,369	562	2,429	3,962	13,835	161,157	0
	(ii)	0	0	0	0	0	0	0
THOMAS A MINNERY	(i)	0	0	0	0	0	0	0
	(ii)	140,632	356	2,162	5,422	10,089	158,661	0
STANLEY R JOHN	(i)	137,961	217	2,670	4,711	13,849	159,408	0
	(ii)	0	0	0	0	0	0	0
Robert Wood	(i)	130,645	3,109	1,581	2,612	13,837	151,784	0
	(ii)	0	0	0	0	0	0	0

**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
	Part I, Line 1a	Jim Daly has flown first-class for international travel and occasionally for domestic flights. Travel for companions was provided to Jim Daly. The cost of the companion travel is included in employee compensation.
	Part I, Line 6	Focus on the Family and Dr. Buford D. Tackett III have a license agreement with regard to Worldview Project intellectual property which was researched and developed by Dr. Tackett prior to his employment with Focus on the Family (Focus). Focus, along with Dr. Tackett, developed this original material into a digitally encoded multimedia, multi-episode series and have created teaching materials for use in connection with the series. This series and the related material are commonly known as the Truth Project DVD series. Focus believes the Truth Project DVD series is consistent with and supportive of its mission and purpose. Commencing on the date that Dr. Tackett ceased to be an employee of Focus, September 21, 2009, he became entitled to receive a royalty payment of 15% of the net revenues from sales of the Truth Project materials. He earned a royalty of \$193,506 for the year ended September 30, 2010.



SCHEDULE M (Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization FOCUS ON THE FAMILY

Employer identification number 95-3188150

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of Contributions, (c) Revenues reported on Form 990, Part VIII, line 1g, (d) Method of determining revenues. Rows include Art, Books, Clothing, Cars, Boats, Intellectual property, Securities, Real estate, Collectibles, Food inventory, Drugs, Taxidermy, Historical artifacts, Scientific specimens, Archeological artifacts, and Other (Commodities, Equipment & Office, Supplies, Software, Licenses, Jewelry).

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

Table with 3 columns: Question, Yes, No. Rows include 30a (During the year, did the organization receive by contribution any property...), 31 (Does the organization have a gift acceptance policy...), 32a (Does the organization hire or use third parties...), and 33 (If the organization did not report revenues...).

**Part II**

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

<b>Identifier</b>	<b>Return Reference</b>	<b>Explanation</b>
Method for Determining Number of Contributors	Part I, Column (b)	Column B includes the number of individual gifts
Third Party Use	Part I, Line 32b	Focus on the Family uses a broker to sell donated publicly traded securities

**Schedule M (Form 990) 2009**

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No 1545-0047

**2009**

**Open to Public  
Inspection**

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**  
▶ **Attach to Form 990.** ▶ **See separate instructions.**

Department of the Treasury  
Internal Revenue Service

**Name of the organization**  
FOCUS ON THE FAMILY

**Employer identification number**

95-3188150

**Part I Identification of Disregarded Entities** (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
CITIZENLINK FKA FOCUS ON THE FAMILY ACTION INC 8655 EXPLORER DRIVE COLORADO SPRINGS, CO 80920 20-0960855	SOCIAL WELFARE	CO	501(C)(4)		Not Applicable

**Part III Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

**Part V Transactions With Related Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III or IV**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?**a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity**b** Gift, grant, or capital contribution to other organization(s)**c** Gift, grant, or capital contribution from other organization(s)**d** Loans or loan guarantees to or for other organization(s)**e** Loans or loan guarantees by other organization(s)**f** Sale of assets to other organization(s)**g** Purchase of assets from other organization(s)**h** Exchange of assets**i** Lease of facilities, equipment, or other assets to other organization(s)**j** Lease of facilities, equipment, or other assets from other organization(s)**k** Performance of services or membership or fundraising solicitations for other organization(s)**l** Performance of services or membership or fundraising solicitations by other organization(s)**m** Sharing of facilities, equipment, mailing lists, or other assets**n** Sharing of paid employees**o** Reimbursement paid to other organization for expenses**p** Reimbursement paid by other organization for expenses**q** Other transfer of cash or property to other organization(s)**r** Other transfer of cash or property from other organization(s)

	Yes	No
<b>1a</b>		No
<b>1b</b>		No
<b>1c</b>		No
<b>1d</b>		No
<b>1e</b>		No
<b>1f</b>		No
<b>1g</b>		No
<b>1h</b>		No
<b>1i</b>	Yes	
<b>1j</b>	Yes	
<b>1k</b>	Yes	
<b>1l</b>	Yes	
<b>1m</b>		No
<b>1n</b>	Yes	
<b>1o</b>	Yes	
<b>1p</b>		No
<b>1q</b>		No
<b>1r</b>		No

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
<b>(1)</b> CitizenLink	I	341,330
<b>(2)</b> CitizenLink	J	210,017
<b>(3)</b> CitizenLink	K	1,124,127
<b>(4)</b> CitizenLink	L	47,552
<b>(5)</b> CitizenLink	N	3,737,783
<b>(6)</b> CitizenLink	O	181,529



**Software ID:**  
**Software Version:**  
**EIN:** 95-3188150  
**Name:** FOCUS ON THE FAMILY

**Form 990, Schedule R, Part V - Transactions With Related Organizations**

<b>(a)</b> Name of other organization	<b>(b)</b> Transaction type(a-r)	<b>(c)</b> Amount Involved (\$)
<b>(1)</b> CitizenLink	I	341,330
<b>(2)</b> CitizenLink	J	210,017
<b>(3)</b> CitizenLink	K	1,124,127
<b>(4)</b> CitizenLink	L	47,552
<b>(5)</b> CitizenLink	N	3,737,783
<b>(6)</b> CitizenLink	O	181,529

## Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 95-3188150  
**Name:** FOCUS ON THE FAMILY

### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

#### 4d. Other program services

(Code ) (Expenses \$ 13,933,168 including grants of \$ 526 ) (Revenue \$ 7,648,720 )

RESOURCES-FOCUS ON THE FAMILY PRODUCES AND/OR DISTRIBUTES A NUMBER OF FILMS, VIDEO PRODUCTS, AUDIO PRODUCTS AND BOOKS THAT ARE USED TO SPREAD THE GOSPEL OF JESUS CHRIST BY HELPING TO PRESERVE TRADITIONAL VALUES AND THE INSTITUTION OF THE FAMILY THESE PRODUCTS DISCUSS MANY ISSUES THAT AFFECT THE FAMILY AND ARE GEARED TO SERVE MANY AGE GROUPS FOCUS ON THE FAMILY BEGAN PUBLISHING BOOKS IN 1985 CURRENTLY, MANY OF THE PRODUCTS ARE CREATED FROM IN-HOUSE WRITERS AND EDITORS, AND ARE SUPPORTED BY CONTRIBUTIONS FROM TALENTED AUTHORS FILM PRODUCTION BEGAN IN 1986 AND HAS CONTINUED PRODUCING NEW PROGRAMS THAT HAVE BEEN TRANSLATED INTO OVER 20 LANGUAGES SEE SCHEDULE O FOR MORE DETAIL ON THE PRODUCTS DEVELOPED AND DISTRIBUTED BY FOCUS ON THE FAMILY

(Code ) (Expenses \$ 5,752,379 including grants of \$ 605,362 ) (Revenue \$ )

PUBLIC POLICY AWARENESS - FOR MANY YEARS, FOCUS ON THE FAMILY (FOCUS) HAS PLAYED AN IMPORTANT ROLE IN EDUCATING THE CHRISTIAN COMMUNITY ON PUBLIC POLICY AND LEGISLATIVE MATTERS THAT ARE CRITICAL IN THE BATTLE TO PRESERVE THE JUDEO-CHRISTIAN FOUNDATION THAT IS VITAL TO BUILDING STRONG FAMILIES IN THIS GREAT NATION AND DEVELOPING A CULTURE THAT IS FRIENDLY TO SHARING THE GOSPEL OF JESUS CHRIST BEGINNING IN FISCAL YEAR ENDED SEPTEMBER 30, 2006, THIS EFFORT WAS INCREASED TO CREATE A POSITIVE IMPACT ON THE DEFINITION OF MARRIAGE (ONLY BETWEEN ONE MAN AND ONE WOMAN), THE SANCTITY OF HUMAN LIFE IN ALL ITS FORMS CITIZEN MAGAZINE, WHICH PUBLISHES 10 ISSUES A YEAR PROVIDED IN-DEPTH STORIES AND ANALYSIS ON PRESSING POLICY CONCERNS DURING THIS YEAR, FOCUS COMMUNICATED IMPORTANT INFORMATION BY MAIL, EMAIL AND WEBCAST ON CRITICAL PUBLIC POLICY ISSUES FOCUS'S ISSUES RESPONSE GROUP PROVIDES RESEARCH AND ANALYSIS NECESSARY TO PROPERLY EDUCATE THE CHRISTIAN COMMUNITY AND REACT TO NEW AND EMERGING ISSUES THAT FACE OUR NATION SMALLER GROUPS WITHIN FOF'S PUBLIC POLICY DEPARTMENT, MINISTER TO VERY SPECIFIC NEEDS

(Code ) (Expenses \$ 5,471,519 including grants of \$ 1,754 ) (Revenue \$ )

INTERNET CONTENT AND MAINTENANCE - Focus on the Family (Focus) has a significant internet presence and believes this is a major avenue to reach people with information that they can access at a moment's notice Through its internet site, Focus can provide information and resources to it's constituents and the general public on a wide variety of topics impacting marriage, parenting, and life in general Focus has websites that address all the various areas that we seek to minister to - Marriage, Parenting, Young Children, Young adults in their college years to early marriage, Sanctity of Human Life, Government and public policy, Social issues, and Ministry to pastors and others in ministry

(Code ) (Expenses \$ 7,381,483 including grants of \$ 4,970 ) (Revenue \$ 1,008,117 )

FAMILY EVENTS - Focus on the Family has sponsored and conducted many events to emphasize the importance of marriage, family and parenting These events are designed to to support, encourage, and educate our constituents and the general public Many local and regional seminars and conferences such as The Celebrate Family Tour, Friday Fight Night, The Truth Project, and Pastor-to-Pastor meetings were also held

(Code ) (Expenses \$ 20,805,101 including grants of \$ 2,913,602 ) (Revenue \$ 1,029,968 )

VARIOUS OTHER MINISTRY EFFORTS (SUCH AS THE FOCUS LEADERSHIP INSTITUTE, INTERNATIONAL OUTREACH, CHRISTIAN WORLDVIEW MINISTRY IE "THE TRUTH PROJECT", TRUE U, DRUG PROOF YOUR KIDS, COUNSELING, OPTION ULTRASOUND, AND OUTREACH TO PREGNANCY RESOURCE CENTERS)

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LTG PATRICK P CARUANA USAF Ret CHAIRMAN/BOARD MEMBER	5 00	X		X				0	0	0
DR R ALBERT MOHLER JR VICE CHAIRMAN/BOARD MEMBER	5 00	X		X				0	0	0
JAMES D DALY PRESIDENT/BOARD MEMBER	45 00	X		X				0	229,593	21,419
ROBERT E HAMBY CPA BOARD MEMBER	10 00	X						0	0	0
DANIEL VILLANUEVA BOARD MEMBER	5 00	X						0	0	0
ELSA PRINCE BROEKHUIZEN BOARD MEMBER	5 00	X						0	0	0
DR KATHLEEN NIELSON BOARD MEMBER	5 00	X						0	0	0
ERIC PILLMORE BOARD MEMBER	5 00	X						0	0	0
LEE TORRENCE BOARD MEMBER	5 00	X						0	0	0
PAUL NELSON BOARD MEMBER	5 00	X						0	0	0
KIM ROBINSON BOARD MEMBER	5 00	X						0	0	0
ANTHONY WAUTERLEK BOARD MEMBER	5 00	X						0	0	0
STU MENDELSON SECRETARY	5 00			X				0	0	0
WADE D CROW CFO	45 00			X				0	144,881	16,198
Daniel R Mellema Treasurer	45 00			X				94,464	0	16,718
BUFORD D TACKETT III Former ASST TREASURER	45 00					X		145,912	0	9,487
GLENN A WILLIAMS CHIEF OPERATING OFFICER	45 00				X			184,349	0	18,634
Clark Miller Chief Strategy Officer	45 00				X			143,360	0	16,814
THOMAS A MINNERY SENIOR VICE PRESIDENT	45 00				X			0	143,150	14,518
STANLEY R JOHN SENIOR VICE PRESIDENT	45 00				X			140,848	0	17,563
Robert Wood Chief Information Officer	45 00				X			135,335	0	15,464
Kent Kiefer SENIOR VICE PRESIDENT	45 00				X			132,767	0	14,786

**Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses**

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	<b>(A) Total expenses</b>	<b>(B) Program service expenses</b>	<b>(C) Management and general expenses</b>	<b>(D) Fundraising expenses</b>
RADIO, TV & FILM	15,220,089	15,091,608		128,481
Printing & Publications	4,164,882	2,739,811	261,888	1,163,183
Postage & Shipping	3,886,900	2,753,629	185,965	947,306
BENEVOLENCE	1,124,987	1,124,987		
Misc Project Developmen	166,435	165,707	728	