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·2 990

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

Open to Public Inspection

| Α | For th | ne 2008 ca | alendar | year, or tax year beginning | July 1 | , 2008, a | nd ending | Jui | ne 30 | , 20 09 | |
|-----------------|-------------|--|---------------------|--|-------------------------|--|--------------------------------|---------------------------------------|------------------------------|-----------------------|-------------|
| B (| Check if | applicable | Please | C Name of organization C. S. Le | wis Institute, | Inc. | | | D Employ | er identification n | umber |
| | | change | use IRS label or | Doing Business As | | | | | 54 | 180201 | 5 |
| | Name c | | print or | Number and street (or PO box if may | I is not delivered to s | street address) | Room/suite | | E Telepho | one number | |
| | | | type. See | 8001 Braddock Road | | | 30 | 00 | (703) | 914-560 | 2 |
| | nıtıal re | | Specific | City or town, state or country, as | nd 7IP + 4 | - | | | ,, | | |
| | Termina | | Instruc- tions. | Springfield, VA 22151-21 | | | | | G Gross re | counts \$ 60 | 9,230 |
| | | ed return | | ne and address of principal officer. | 10 | | | T | | | |
| \Box | *pplication | on pending | | • • | | | | | | | ₩ No |
| | , | | | as A. Tarrants III, Presiden | | | | 1 | | ncluded? LYes | ∐No |
| | | empt status | | 501(c) () ∢ (insert no) ☐ 494 | 7(a)(1) or 5 | 527 | | If "N | lo," attach a | list (see instruction | ns) |
| | | | | ewisinstitute.org | | | | H(c) Group | exemption nur | | |
| ĸ | Type of | organization | ✓ Corpo | ration 🗌 Trust 🗌 Association 🔲 Ot | her ▶ | L Year | of formation | 1976 | M State of | legal domicile. VA | <u> </u> |
| Pa | art I | Summ | ary | | | | | | | | |
| Governance | | Develop | discip | the organization's mission of the who can articulate, def | end, and live | faith in Chris | t through | personal | and pub | lic life. | |
| တိ | I . | | | | | | | | 3 | | 13 |
| •ಕ | I . | | | ng members of the governing | | | | | | | 13 |
| Activities & | 1 | | | pendent voting members of | - | body (Part V | /I, line 1b) | | . 4 | | 12 |
| ₹ | 5 | Total nun | nber of | f employees (Part V, line 2a) | | | | | . 5 | | 3 |
| Ä | 6 | Total nun | nber of | f volunteers (estimate if nece | essary) | | | | . 6 | | 6 |
| | 7a | Total gro | ss unre | elated business revenue fron | n Part VIII, line | 12, column_(| (C)7 | | . 7a | | |
| | b | Net unrel | ated b | usiness taxable income from | Form-990-T., | line,34 | <u>. l</u> | | . 7b | | |
| | | | | 1 | KEC | EIVE | 701 L | Prior Y | ear | Current Yea | ır |
| | 8 | Contribut | ions ar | nd grants (Part VIII, line 1h) | | | <u> </u> | | 573,725 | 56 | 6,444 |
| Revenue | I . | | | revenue (Part VIII, line 2g) | lol | 2 2 2010 | 121 - | | 65,959 | 3 | 7,730 |
| Ver | 1 | _ | | | IRI : JAN, | 3 3 S.A.II . | <u> </u> | | 201 | | 397 |
| æ | | | | me (Part VIII, column (A), lin | | | | | 23,440 | 3 | 0,798 |
| | 111 | Other rev | enue (| Part VIII, column (A), lines 5 dd lines 8 through 11 (must e | DO BOT VIII | rojnava (γ) jibo ne⊡aŭoù i⁄i e)// | . ₁¿、′ ├─ | | 663,325 | | |
| | _ | | | | | | 3 12) | | 003,323 | 03 | 5,549 |
| | 1 | | | lar amounts paid (Part IX, c | | | · · · - | | | | |
| 'n | I . | | • | or for members (Part IX, co | | | | | 22 2 2 2 4 | | |
| Se | 15 | Salaries, d | other co | ompensation, employee benef | its (Part IX, colu | ımn (A), lines 5 | 5–10) | | 295,621 | 26 | 6,692 |
| Expenses | 16a | Professio | nal fun | draising fees (Part IX, column | (A), line 11e) | | | | | | ī |
| 찚 | Ь | Total fund | draisino | expenses (Part IX, column (D |), line 25) ▶ | 16,9 | 928 | | | | |
| | | | | (Part IX, column (A), lines 1 | | | | | 302,506 | 42 | 2,941 |
| | | | | Add lines 13-17 (must equi | | | | | 598,127 | 68 | 9,633 |
| | | | | penses. Subtract line 18 from | | (), 2 | | | 65,189 | -3 | 4,084 |
| - Se | | ,,010,100 | | | | • • • • | | Beginning | | End of Year | |
| ets or | | | | | | | | | 154,376 | | 3,214 |
| 88 | | | | urt X, line 16) | | | · · · | | ' | | |
| Net A Fund I | 21 | | | Part X, line 26) | | | · · · | | 18,316 | | 5,593 |
| | | | | ind balances. Subtract line 2 | 21 from line 20 | J | | | 136,060 | 9 | 7,621 |
| Pa | irt II | | ature | | | | | | | | |
| | | Under per | nalties of | perjury, I declare that I have examine, correct, and complete. Declaration | ed this return, inclu | uding accompany er than officer) is | ring schedules hased on all | and staten | nents, and to of which no | the best of my kno | wledge |
| | | E IG Donce | , 10 15 114 | | T | or man omeon, 10 | 50000 0 | 1 | 7 | 1.1. | |
| Sig | ın | | | (M / gruce | Lun | son- | | | 011 | 14/20 | 110 |
| He | re | Signa | ature of o | officer | / | | | Dat | е | • | |
| | | k | Η. | Kruce Dud | V COD | Trea | ASUr | PI | | | |
| | | Type | or print | name and title | | 1 | | · · · · · · · · · · · · · · · · · · · | | | |
| _ | | | _ | | | Date | Check | c if | Preparer's in | dentifying number | |
| | | Preparer's signature | | | | " | self- | _ | (see instruct | | |
| Paid | I | Signature | • | | | | emplo | yed ► L | | | |
| | arer's | | | | | | | | <u> </u> | | |
| • | Only | Firm's nat | | ours | | | | EIN | • | | |
| OSE | Only | if self-em | | + 4 | | | | Phone n | o > (|) | |
| Ma | v the | | | return with the preparer sh | own above? (s | see instruction | ns) | | | . Yes | No |

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

| Pai | rt III Statement of Program Service Accomplishments (see instructions) | |
|-----|--|---------------|
| 1 | Briefly describe the organization's mission. Develop disciples who can articulate, defend, and live faith in Christ through personal and public life, | |
| | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? | es 🗹 No |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program | es 🗸 No |
| 4 | Describe the exempt purpose achievements for each of the organization's three largest program services by expension 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of graph allocations to others, the total expenses, and revenue, if any, for each program service reported | |
| 4a | (Code) (Expenses \$ 394,828 including grants of \$) (Revenue \$ 24,5 The Institute's Discipling & Mentoring Program, called the C. S. Lewis Fellows Program, has approximately 7 participants each year that are involved in a Year One or Year Two discipling program that meets on a regular from August through June. | 0 ir basis |
| 4b | (Code:) (Expenses \$ 45,622 including grants of \$) (Revenue \$ 21,52 The Institute sponsors four or five conference and seminar programs annually that present recognized spear on discipleship, evangelism and apologetics. | kers |
| 4c | (Code:) (Expenses \$ including grants of \$) (Revenue \$ |) |
| | Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$) | |
| 4e | Total program service expenses ► \$ 440,450 (Must equal Part IX, Line 25, column (B).) | |

| Par | Checklist of Required Schedules | | | |
|-----|---|-----|-----|--------------|
| | | | Yes | No |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | ✓ | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | ✓ | <u> </u> |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | 1 |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II | 4 | | ✓ |
| 5 | Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III | 5 | | 1 |
| 6 | Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | ✓ |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . | 7 | | 1 |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | 1 |
| 9 | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | √ |
| 10 | Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | 1 |
| 11 | Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable | 11 | ✓ | |
| 12 | Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII. | 12 | | √ |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | V |
| 14a | Did the organization maintain an office, employees, or agents outside of the US? | 14a | | V |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S? If "Yes," complete Schedule F, Part I | 14b | | ✓ |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II. | 15 | | 1 |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5.000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III | 16 | | 1 |
| 17 | Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I | 17 | | 1 |
| 18 | Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | ✓ | |
| 19 | Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | 1 |
| 20 | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20 | | 1 |
| 21 | Did the organization report more than \$5,000 on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II | 21 | | ✓ |
| 22 | Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | ✓ |
| 23 | Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J | 23 | | ✓_ |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than | | | |
| | \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to question 25 | 24a | | 1 |
| | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | V |
| | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | 1 |
| | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | - |
| | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | ✓ |
| b | Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I | 25b | | 1 |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II. | 26 | | ✓_ |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III | 27 | | ✓ |

| Pa | rt IV Checklist of Required Schedules (continued) | | | |
|----|---|-----|-----|----------|
| | | | Yes | No |
| 28 | During the tax year, did any person who is a current or former officer, director, trustee, or key employee | | | |
| а | Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV | 28a | | 1 |
| b | Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV | 28b | | 1 |
| С | Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV | 28c | | 1 |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | 1 |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | 30 | | 1 |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | 1 |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | 32 | | 1 |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I | 33 | | ✓ |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 | 34 | | / |
| 35 | Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35 | | ✓ |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | 1 |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | 1 |

Form **990** (2008)

| Pai | t V Statements Regarding Other IRS Filings and Tax Compliance | | | |
|----------|--|----------|----------------|-----------|
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0 | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | | ✓ |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | 3a | | 1 |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . | 3b | | <u> </u> |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | 1 |
| b | If "Yes," enter the name of the foreign country: ▶ | | | |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts | | water dense in | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | 1 |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | Y |
| | If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? | 5c | | 1 |
| | Did the organization solicit any contributions that were not tax deductible? | 6a | | √ |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?. | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| а | Did the organization provide goods or services in exchange for any quid pro quo contribution of more than | 7a | | |
| | \$75? | 7b | | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | 1- | | |
| | required to file Form 8282? | 7c | | 1 |
| | If "Yes," indicate the number of Forms 8282 filed during the year | | | |
| e | benefit contract? | 7e 7f | | 1 |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . | 7g | | |
| 9 | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as | - 3 | | |
| n | required? | 7h | | |
| 8 | Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring | | | |
| | organization, have excess business holdings at any time during the year? | 8 | | |
| 9 | Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. | ļ J | | |
| а | Did the organization make any taxable distributions under section 4966? | 9a | | <u> </u> |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | - |
| 10 | Section 501(c)(7) organizations. Enter | | | |
| | militation lees and capital contributions included on Fait viii, line 12 | | | |
| | Gross receipts, included on Form 330, Fait Vill, line 12, for public use of clab lacintos | | | 1 |
| 11 | Section 501(c)(12) organizations. Enter: | | | 1 |
| | Gross income from members or shareholders | | | • |
| a | amounts due or received from them) | | | . |
| 12a b | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. | 12a | | |

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

| Sec | tion A. Governing Body and Management | | | |
|-----|--|---------|----------|--------------|
| | | | Yes | No |
| | For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the | | | |
| | circumstances, processes, or changes in Schedule O. See instructions. | | | |
| 1a | Enter the number of voting members of the governing body | | | |
| b | Enter the number of voting members that are independent 1b 12 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | | | |
| | any other officer, director, trustee, or key employee? | 2 | | ✓ |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct | | | |
| | supervision of officers, directors or trustees, or key employees to a management company or other person? | 3 | | 1 |
| 4 | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? | 4 | | 1 |
| 5 | Did the organization become aware during the year of a material diversion of the organization's assets? | 5 | | ✓ |
| 6 | Does the organization have members or stockholders? | 6 | ✓ | |
| - | Does the organization have members, stockholders, or other persons who may elect one or more members | | | Į |
| | of the governing body? | 7a | | 1 |
| b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | 7b | | √ |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during | | | |
| Ū | the year by the following. | | | |
| 2 | The governing body? | 8a | 1 | |
| | Each committee with authority to act on behalf of the governing body? | 8b | √ | |
| | Does the organization have local chapters, branches, or affiliates? | 9a | 1 | |
| | If "Yes," does the organization have written policies and procedures governing the activities of such chapters, | | | |
| U | affiliates, and branches to ensure their operations are consistent with those of the organization? | 9b | ✓ | |
| 10 | Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations | 40 | 1 | |
| | must describe in Schedule O the process, if any, the organization uses to review the Form 990 , | 10 | <u> </u> | |
| 11 | Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at | 44 | | / |
| ~ | the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 11 | | |
| Sec | tion B. Policies | | Yes | No |
| | | 12a | ./ | NO |
| | Does the organization have a written conflict of interest policy? If "No," go to line 13 | 120 | | |
| b | Are officers, directors or trustees, and key employees required to disclose annually interests that could give | 12b | 1 | |
| | rise to conflicts? | 120 | <u></u> | |
| С | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done | 12c | ✓ | |
| 13 | Does the organization have a written whistleblower policy? | 13 | √ | |
| 14 | Does the organization have a written document retention and destruction policy? | 14 | ✓ | ļ |
| 15 | Did the process for determining compensation of the following persons include a review and approval by | | | 1 |
| | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. | | | <u>.</u> |
| а | The organization's CEO, Executive Director, or top management official? | 15a | √ | |
| b | Other officers or key employees of the organization? | 15b | 1 | <u> </u> |
| | Describe the process in Schedule O (see instructions) | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | | | لــــا |
| | with a taxable entity during the year? | 16a | | 1 |
| b | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate | | | ! |
| | its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard | | | |
| | the organization's exempt status with respect to such arrangements? | 16b | | <u> </u> |
| Sec | tion C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ▶ | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(or |)(3)s | only) | |
| | available for public inspection. Indicate how you make these available. Check all that apply. | | | |
| | ✓ Own website ☐ Another's website ☑ Upon request | | | |
| 19 | Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict | of inte | erest | |
| | policy, and financial statements available to the public. | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and reco | rds o | f the | |
| - | organization. ► A. Bruce Duerson, C.S. Lewis Institute, 8001 Braddock Rd., Suite 300, Springfield, VA 2: | 2151 | | |

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

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

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

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

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

| (A) | | (B) | | | | C) | | | tee, or key em | (E) | (F) |
|---|---------|-------------------|--------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|--|--|
| Name and Title | | Average | Positi | on (d | chec | k all | that ap | | Reportable | Reportable | Estimated |
| | | hours per week | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | compensation from the organization (W-2/1099-MISC) | compensation from related organizations (W-2/1099-MISC) | amount of other compensation from the organization and related organizations |
| Rev. Thomas A. Tarrants III - Pre | esident | 40 | > | | 1 | 1 | 1 | | 93,000 | | 16,794 |
| Thomas W. Simmons - Executiv | e VP | 40 | | | 1 | 1 | | | 53,000 | | 15,480 |
| A. Bruce Duerson - Treasurer | | 16 | | | 1 | | | | 3,500 | | |
| Elizabeth B. Fitch, Esq Secreta | ary | 1 | 4 | | 1 | | | | | | |
| Kerry A. Knott - Chairman of the | Board | 1 | 1 | | 1 | | | | | | |
| Timothy Bradley - Director | | 1 | √ | | | · | | | | | |
| Cherie Harder - Director | | 1 | ✓ | | | | | | | | |
| James R. Hiskey - Director | | 1 | ✓ | | | | | | | | |
| Robin King - Director | | 1 | √ | | | | | | | | |
| Steven J. Law - Director | | 1 | | | | | | | | | |
| Jeff Lindeman, Ph D Director | | 1 | √ | | | | | | | | |
| Carl R. Meyer - Director | | 1 | √ | | | | | | | | |
| Chris T Morris - Director | | 1 | √ | | | | | | | | |
| Marlise Streitmatter - Director | | 1 | 1 | | | | | | | | |
| Susan Ward - Director | | 1 | √ | | | | | | | | |
| | | | | | | | | | | | |
| *************************************** | | | ************ | | | | | | | | |

| Pa | Section A. Officers, Directors, Tru | | T | | | | | nest | | | | | | |
|----|---|---------------------------|--------------------------------|-----------------------|--------------|--------------|------------------------------|-------------------|--|--|-----------|--|--|--|
| | (A) Name and title | (B) Average | Positi | on (c | | C) kall | that ap | (vla | (D) Reportable | (E) Reportable | E | (F) stimated | | |
| • | | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | compensation from the organization (W-2/1099-MISC) | compensation from related organizations (W-2/1099-MIS | C) con | mount of other other opensation from the ganization of related panizations | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
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| | | | | ļ <u>.</u> | | | | | | | | | | |
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| | | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | Total | | | | | | | | 149,500 | | | 32,274 | | |
| 2 | Total number of individuals (including those organization ► | e in 1a) wh | o rec | eive | ea r | nore | e tnan | 1 \$11 | ou,uuu in repo | | ensation | | | |
| 3 | Did the organization list any former office employee on line 1a? If "Yes," complete S | | | | | | | oyee | e, or highest c | ompensated | 3 | Yes No ✓ | | |
| 4 | For any individual listed on line 1a, is the sthe organization and related organizations individual | um of repo greater tha | ortabl n \$15 | e co 50,0 | omp | ens 'If " | ation Yes," | anc con | other compe | nsation from le J for such | 4 | - v | | |
| 5 | Did any person listed on line 1a receive services rendered to the organization? If " | or accrue Yes," comp | comp lete | oen: Sch | satio edu | on f le J | rom a | any <i>uch</i> | unrelated org person | anization for | 5 | \- <u>-</u> | | |
| Se | ction B. Independent Contractors | | | | | | | | | | | | | |
| 1 | Complete this table for your five highest compensation from the organization | ompensate | d ind | epe —— | nde | nt c | ontra | ctor | s that received | d more than S | \$100,000 |) of | | |
| | (A) Name and business add | ress | | | | | | | (B) Description of s | ervices | Compe | nsation | | |
| No | 16 | | | | | | | | | | | | | |
| | | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | |
| | | | | | - | | | | | | | | | |
| 2 | Total number of independent contractors compensation from the organization ▶ | (including t | hose | in | 1) w | /ho | receiv | /ed | more than \$10 | 00,000 in | | | | |

| Part | VII | Statement of Re | venue | | | | | |
|--|------------------|---|--|---|----------------------|--|---|---|
| | **** | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| Contributions, gifts, grants and other similar amounts | b d e f | Federated campaigns Membership dues Fundraising events Related organizations Government grants (contri All other contributions, gifts, g and similar amounts not inclu Noncash contributions include Total. Add lines 1a–1f | to the state of th | 566,444 | 566,444 | | | |
| | | | | | | | | |
| епи | 2a | Conference Registrat | ions | | 13,199 | 13,199 | | |
| Sev. | Za b | Discipleship & Mento | | | 24,531 | 24,531 | | ······································ |
| e F | _ | | | | 2,,001 | 2.,00 | | |
| Program Service Revenue | c d e | | | | | | | |
| gra | f | All other program servi | ce revenue . | | | | | |
| Pro | g | Total. Add lines 2a-2f | | , , , . > | 37,730 | | | |
| | 3 | Investment income (incother similar amounts) | _ | | 397 | | 397 | |
| | 4 | Income from investment o | f tax-exempt bon | d proceeds 🕨 | | 005 | | |
| | 5 | Royalties | | <u>, , , , , , , , , , , , , , , , , , , </u> | 635 | 635 | | |
| | | | (ı) Real | (ii) Personal | | | | |
| | 6a | Gross Rents | | | | | | |
| | b | Less: rental expenses | | | | | | |
| | | Rental income or (loss) | | | | | | |
| | | Net rental income or (lo | oss) | . • | | | | |
| | | ` 1 | (i) Securities | (ii) Other | | | · · · · · · · · · · · · · · · · · · · | |
| | 7a | Gross amount from sales of assets other than inventory | (,, 555 | (4) 0 1.101 | | | | : |
| | | Less: cost or other basis and sales expenses . | | | | | | |
| | | Gain or (loss) | • | . , , ▶ | | when the second | | *************************************** |
| Revenue | 8a | Gross income from events (not including \$ of contributions reported | | | | | | |
| | | See Part IV, line 18 | a | 20,540 | | | | · ' |
| Other | b | Less, direct expenses | , , b | 35,981 | | | | ale telephon colleges comme more exemperations — 1 |
| Q | C | Net income or (loss) fro | m fundraising e | vents . 🕨 | -15,441 | -15,441 | | |
| | | Gross income from gam See Part IV, line 19 | ing activities. | | | | | |
| | | Less: direct expenses. Net income or (loss) fro | b m gaming activ | ities ► | | | | |
| | | Gross sales of inverteurns and allowances Less: cost of goods so | а | 1,268 | | | | |
| | | Net income or (loss) from | | ory ► | 1,268 | 1,268 | | |
| | | Miscellaneous Reve | | Business Code | ., | ,= | | |
| | 44- | Donated Services & N | | | 64,516 | 64,516 | | |
| | 11a | | | | 04,510 | U-1,510 | | |
| | ь | | | | | | | |
| | С | | | | | | | |
| | d | All other revenue | | L | | | | |
| | е | Total. Add lines 11a-11 | 1d | ▶ | 64,516 | | | |
| | 12 | Total Revenue. Add lin | | 5, 6d, 7d, 8c, | 655.549 | 88.708 | 397 | |

Part IX Statement of Functional Expenses

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

| | All other organizations must complete colu | | | | |
|----|--|-----------------------|------------------------------------|---|--------------------------------|
| | not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 | | | | 4 |
| 2 | Grants and other assistance to individuals in the U.S. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 | | | | 1 1 |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 192,000 | 139,000 | 53,000 | |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 35,000 | | 35,000 | |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | | | | |
| 9 | Other employee benefits , | 32,960 | 18,465 | 14,495 | |
| 10 | Payroll taxes | 6,732 | 6,732 | | |
| 11 | Fees for services (non-employees) | | ĺ | | |
| | Management | | | | |
| | Legal | | | | |
| | A = = = = +!= = | 4,298 | | 4,298 | |
| | 1 11 | | | | |
| | Professional fundraising services See Part IV, line 17 | | | | - |
| | Investment management fees | | | | |
| | Other | 7,663 | | 7,663 | |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | 15,968 | 7,186 | 7,186 | 1,596 |
| 14 | Information technology | 19,808 | | 19,808 | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 45,255 | 22,628 | 22,627 | |
| 17 | Travel | 7,278 | 5,519 | 1,759 | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings . | 76,831 | 76,831 | | |
| 20 | Interest | 188 | | 188 | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization. | 2,204 | | 2,204 | |
| 23 | Insurance . | | | | |
| 24 | Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) | | | | |
| а | Telephone | 11,080 | 4,986 | 4,986 | 1,108 |
| b | Donated Services & Materials | 64,516 | 9,016 | 53,700 | 1,800 |
| c | Honoraria | 96,241 | 96,241 | | |
| d | Printing | 23,598 | 23,598 | | |
| е | Postage & Shipping | 42,672 | 30,248 | | 12,424 |
| f | All other expenses | 5,341 | | 5,341 | |
| 25 | Total functional expenses. Add lines 1 through 24f | 689,633 | 440,450 | 232,255 | 16,928 |
| 26 | Joint Costs. Check here ► ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation | | | | |

| Рa | Ęt X | Balance Sheet | | | | | |
|-------------|----------|--|--|----------|--|--------------|-------|
| | | | (A) Beginning of year | | (E End o | 3) f year | |
| | 1 | Cash—non-interest-bearing | 110,975 | 1 | | 28 | 3,173 |
| | 2 | Savings and temporary cash investments | 30,535 | 2 | | | ,062 |
| | 3 | Pledges and grants receivable, net | | 3 | | | |
| | 4 | Accounts receivable, net | 2,707 | 4 | | | |
| | 5 | Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L | | 5 | | | |
| | 6 | Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L | | 6 | ************************************** | - | - |
| ts | 7 | Notes and loans receivable, net | | 7 | | | |
| Assets | 8 | Inventories for sale or use | 984 | 8 | | | 871 |
| ⋖ | 9 | Prepaid expenses and deferred charges | 3,580 | 9 | | 4 | ,580 |
| | 10a | Land, buildings, and equipment: cost basis 10a 19,370 | | | | | |
| | b | Less. accumulated depreciation Complete Part VI of Schedule D | 5,595 | 10c | | 4 | ,528 |
| | 11 | Investments—publicly traded securities | | 11 | | | |
| | 12 | Investments—other securities. See Part IV, line 11 | | 12 | | | |
| | 13 | Investments—program-related. See Part IV, line 11 | | 13 | | | |
| | 14 | Intangible assets | | 14 | | | |
| | 15 | Other assets. See Part IV, line 11 | 4.7.676 | 15 | | | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 154,376 | 16 | | | 3,214 |
| | 17 | Accounts payable and accrued expenses | 2,116 | | | 5 | ,993 |
| Ş | 18 | Grants payable | 46 200 | 18 | | 40 | |
| | 19 | Deferred revenue | 16,200 | 19 20 | | 19 | ,600 |
| | 20 | Tax-exempt bond liabilities | | 21 | | | |
| tie | 21 | Escrow account liability Complete Part IV of Schedule D | | 21 | | | |
| Liabilities | 22 | Payables to current and former officers, directors, trustees, key | * * | | » × | | |
| | | employees, highest compensated employees, and disqualified | dig apa gan a an a a a a apa a min sussimus su | 22 | | | |
| | 22 | persons. Complete Part II of Schedule L | | 23 | | | |
| | 23 24 | Unsecured notes and loans payable | | 24 | | | |
| | 25 | Other liabilities Complete Part X of Schedule D | | 25 | | | |
| | 26 | Total liabilities. Add lines 17 through 25 | 18,316 | 26 | | 25 | ,593 |
| Balances | | Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34. | . * * | | , | | • |
| auc | 27 | Unrestricted net assets | 121,060 | 27 | - | 35 | ,621 |
| Bal | 28 | Temporarily restricted net assets | 15,000 | 28 | | | 2,000 |
| | 29 | Permanently restricted net assets | | 29 | | | |
| Fur | | Organizations that do not follow SFAS 117, check here ▶ □ | | | | | |
| or Fund | | and complete lines 30 through 34. | | _ | _ | | |
| | 30 | Capital stock or trust principal, or current funds . | | 30 | | | |
| sse | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | | | |
| Ä | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | | | |
| Net Assets | 33 | Total net assets or fund balances | 136,060 | 33 | | | ,621 |
| | 34 | Total liabilities and net assets/fund balances | 154,376 | 34 | - | 123 | ,214 |
| Pa | rt XI | Financial Statements and Reporting | | | | | |
| | | | | | | Yes | No |
| 1 2a | | bunting method used to prepare the Form 990. \square Cash \square Accrual \square the organization's financial statements compiled or reviewed by an indi- | | ? | 2a | ✓ | { |
| b | | e the organization's financial statements audited by an independent according to the companies of the control o | | | 2b | | 1 |
| C | | es" to lines 2a or 2b, does the organization have a committee that assumes | | siaht c | | | |
| · | | audit, review, or compilation of its financial statements and selection of an inc | | | 2c | 1 | |
| 3a | | result of a federal award, was the organization required to undergo an | | | | | |
| | the S | Single Audit Act and OMB Circular A-133? | | | . <u>3a</u> | | ✓ |
| b | If "Y | es," did the organization undergo the required audit or audits? | <u>.</u> | | . 3b | | |

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

| C.S | . Le | wis Institute, | , Inc. | | | | | | 54 : | | 1802015 | _ | | |
|----------|--|---|---------------------------|--|------------|------------------------|--------------------------|---------------------|--------------|--------------------------|--------------------|-----|--|--|
| Pa | rt I | Reason | for Public Ch | arity Status (All or | ganizatio | ons mus | t compl | ete this | part.) (se | e instru | ctions) | _ | | |
| The | oraa | nization is n | ot a private four | dation because it is: | (Please o | heck only | y one org | anizatio | า.) | | | | | |
| 1 | | | | rches, or association | | | | | | A)(i). | | | | |
| 2 | | - | | on 170(b)(1)(A)(ii). (Att | | | | | , ,,,,,, | *** | | | | |
| 3 | \exists | | | nospital service organ | | | in sectio | n 170(h) | (1)(A)(iii). | (Attach S | Schedule H) | | | |
| 4 | $\overline{\Box}$ | | | tion operated in conj | | | | | | | | _ | | |
| 4 | ш | | | ate: | | | apital uc | scribed i | 11 30011011 | 110(0)(1 | May(m). Lines the | • | | |
| _ | | - | - | | | | · | | b | | Lunit doporibod : | _ | | |
| 5 | | section 170 | (b)(1)(A)(iv). (Co | | _ | | | | | | i unii described i | 11 | | |
| 6 | | | - | ernment or governme | | | | | | | | | | |
| 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 | | | | in section 170(b)(1) | | Complete | Part II.) | | | | | | | |
| 9 | | | | receives: (1) more that | | | | m contrib | outions, m | embersh | ip fees, and gross | s | | |
| • | | | | ed to its exempt funct | | | | | | | | | | |
| | | | | ent income and unre | | | | | | | | | | |
| | | | | after June 30, 1975. | | | | | | , | • | | | |
| 40 | | | _ | nd operated exclusive | | | | | | (a)(A) (co | e instructions) | | | |
| 10 11 | H | | | nd operated exclusive | | | | | | | | . ~ | | |
| 11 | ш | All Organiza | one or more pul | alid operated exclusiv | ely IOI II | describer | t UI, tU p d in secti | on 500/a | 1/1) or sec | olis oi, o otion 500: | (a)(2) See section | n | | |
| | purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(2). Check the box that describes the type of supporting organization and complete lines 11e through 11h | | | | | | | | | | | | | |
| | 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 | | | | | | | | | | | | | |
| е | Ш | | | | | | | | | | | | | |
| | 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 | | | | | | | | | | | | | |
| f | | | | | on from | the IRS | that it is | a Type | i, Type II | , or Type | Ill supporting | _ | | |
| | | | , check this box | | | | | | | | L | لـ | | |
| g | | Since Augus following pe | | the organization acce | epted any | gift or c | ontributio | on from a | iny of the | : | F | _ | | |
| | | (i) A persor | who directly or | r indirectly controls, e | either alo | ne or tog | ether wit | h persor | is descrit | oed in (ii) | Yes No | | | |
| | | | | ning body of the supp | | | | | | | 11g(i) | _ | | |
| | | (ii) A family | member of a pe | rson described in (i) a | above? | | | | | | 11g(ii) | | | |
| | | | | of a person described | | | | | | | 11g(iii) | | | |
| h | | | | ation about the organ | | | | | | | | _ | | |
| (i) | Name | of supported | (ii) EIN | (iii) Type of organization | | organization | | ou notify | (vi) l | s the | (vii) Amount of | _ | | |
| | org | anization | | (described on lines 1–9 | | sted in your document? | | nization in of your | organizat | | support | | | |
| | | | | above or IRC section (see instructions)) | governing | COCUMENT | | or your | | zed in the S.? | | | | |
| | | | | | Yes | No | Yes | No | Yes | No | | | | |
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| | | | 1 | | 1 | 1 | 1 | l | 1 | | | | | |

Total

| Par | Support Schedule for Org (Complete only if you check | | | | | and 170(b) | (1)(A)(vi) |
|------------|--|-------------------------------------|---------------------------------------|---|--|--------------------------|---------------|
| Sec | tion A. Public Support | | <u> </u> | | ' | | |
| | lendar year (or fiscal year beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | ļ |
| 4 | Total. Add lines 1-3 | | | | | | |
| 5 6 | 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). Public support. Subtract line 5 from line 4. | | | | | | |
| | tion B. Total Support | | <u> </u> | L.———— | L | | |
| | lendar year (or fiscal year beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| 7 | Amounts from line 4 | | | | | | |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 11 | Total support. Add lines 7 through 10 . | | <u> </u> | | L | | |
| 12 | Gross receipts from related activities, etc | • | • | | | 12 | |
| 13 | First five years. If the Form 990 is for organization, check this box and stop he tion C. Computation of Public Su | re | <u> </u> | | | | |
| <u> 14</u> | Public support percentage for 2008 (line 6 | | | 1 column (fi) | | 14 | % |
| 15 | Public support percentage from 2007 Sch | • • • | = | ., 50.0 (1) | | 15 | %_ % |
| | 33½% support test—2008. If the organization qualifies | zation did not | check the box | | | % or more, ch | neck this box |
| b | 33% % support test—2007. If the organization qua | zation did not o | check a box on | line 13 or 16a, | and line 15 is | 33% % or mo | |
| 17a | 10%-facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances the "facts-and-circumstances" and the organization meets the organiza | acts-and-circui | mstances" test, | check this box | and stop here | . Explain ın Pa | rt IV how the |
| b 18 | 10%-facts-and-circumstances test—2007 more, and if the organization meets the "facts-and-circumsta Private foundation. If the organization did | acts-and-circun inces" test. The | nstances" test, o organization qua | check this box a alifies as a public | and stop here. cly supported o | Explain in Parganization | rt IV how the |

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

| | Complete only if you checke | d the box of | illie 9 01 Fai | 11.1. | _ | | |
|----------|--|-------------------|------------------|-------------------|-----------------|------------------|--------------------|
| | tion A. Public Support | (2) 0004 | (h) 2005 | (a) 2006 | (d) 2007 | (a) 2008 | (f) Total |
| . Ca | alendar year (or fiscal year beginning in) 🕨 | (a) 2004 | (b) 2005 | (c) 2006 | (a) 2007 | (e) 2008 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 398,495 | 437,132 | 521,835 | 573,725 | 566,444 | 2,497,631 |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | 136,079 | 66,697 | 20,064 | 65,959 | 37,730 | 326,529 |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | : | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 | Total. Add lines 1-5 | 534,574 | 503,829 | 541,899 | 639,684 | 604,174 | 2,824,160 |
| 7a | Amounts included on lines 1, 2, and 3 received from disqualified persons . | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 | | | | | | |
| C | Add lines 7a and 7b | 0 | 0 | 0 | 0 | 0 | 0 |
| 8 | Public support (Subtract line 7c from line 6) | | | | | | 2,824,160 |
| | tion B. Total Support | | | | | | |
| Ca | alendar year (or fiscal year beginning in) 🕨 | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| 9 | Amounts from line 6 | 534,574 | 503,829 | 541,899 | 639,684 | 604,174 | 2,824,160 |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 163 | 464 | 343 | 201 | 1,032 | 2,203 |
| b | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c | Add lines 10a and 10b | 163 | 464 | 343 | 201 | 1,032 | 2,203 |
| 11 | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) | 10 | | 17,592 | 23,440 | 50,978 | 92,020 |
| 13 | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | 2,918,383 |
| 14 | First five years. If the Form 990 is for toganization, check this box and stop it | | n's first, secon | | ·- | ear as a sectio | n 501(c)(3) ▶ □ |
| Sec | tion C. Computation of Public Sur | port Percer | ntage | | | | |
| 15 16 | Public support percentage for 2008 (line Public support percentage from 2007 S | | | |)) | 15 | 96.8 % 98.9 % |
| | tion D. Computation of Investmen | | | | - | | |
| 17 | Investment income percentage for 2008 | | | by line 13. co | lumn (fl) | 17 | .08 % |
| 18 | Investment income percentage from 20 | • | | - | | 18 | .05 % |
| | 33% % support tests – 2008. If the orga 17 is not more than 33% %, check this bo | anization did no | ot check the bo | ox on line 14, at | | | |
| b | 33% % support tests—2007. If the organiline 18 is not more than 33% %, check this | ization did not e | check a box on | line 14 or line 1 | 9a, and line 10 | 6 is more than 3 | 33/3 %, and |
| 20 | Private foundation If the organization | • | _ | • | | | |

| Scneaule A (F | orm 990 or 990-EZ) 2008 Page |
|---|--|
| Part IV | Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions) |
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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

| Name | of the organization | | E | Employer identification number |
|--------|---|--|-----------------|--|
| _C.S | . Lewis Institute, Inc. | | | 54 1802015 |
| Pa | Organizations Maintaining Do the organization answered "Yes | onor Advised Funds or Other Similar s" to Form 990, Part IV, line 6. | Funds | s or Accounts. Complete if |
| | | (a) Donor advised funds | | (b) Funds and other accounts |
| 1 | Total number at end of year | | | |
| 2 | Aggregate contributions to (during year) | | | |
| 3 | Aggregate grants from (during year) . | | | |
| 4 | Aggregate value at end of year | | | |
| 5 | Did the organization inform all donors and | donor advisors in writing that the assets in donor advisors in writing that the assets is donor advisors assets in donor advisors in the donor advisors in the donor advisors in the donor advisors in the donor advisors in writing that the assets in the donor advisors in writing that the assets in the donor advisors in writing that the assets in the donor advisors in writing that the assets in the donor advisors in writing that the assets in the donor advisors in writing that the assets in the donor advisors in the donor advisors in writing that the assets in the donor advisors in the dono | held in ontrol? | donor advised Yes . No |
| 6 | used only for charitable purposes and not | lonors, and donor advisors in writing that of the tonor advi | isor or o | other |
| | impermissible private benefit? | | | Yes No |
| Pa | t II Conservation Easements. Com | plete if the organization answered "Yes" | to For | rm 990, Part IV, line 7. |
| 2 | Purpose(s) of conservation easements hel Preservation of land for public use (e.g. Protection of natural habitat Preservation of open space Complete lines 2a–2d if the organization he on the last day of the tax year. | ☐ Preservati | on of an | n historically important land area certified historic structure of a conservation easement |
| | on the last say of the tax your | | | Held at the End of the Yea |
| _ | Total number of conservation easements | | | |
| a | Total acreage restricted by conservation e | | | |
| b | Number of conservation easements on a | | | · = |
| C | Number of conservation easements included the conservation of the conservation easements included the conservation easements included the conservation easements of a conservation easements included the conservation easement easements | `` | | |
| d | | ` ' ' | | |
| 3 | the taxable year | fied, transferred, released, extinguished, or | termin | nated by the organization during |
| 4 | • | to conservation easement is located ▶ | | |
| 5 | | cy regarding the periodic monitoring, inspe | | |
| • | enforcement of the conservation easemer | nts it holds? | | Yes No |
| 6 | | oring, inspecting, and enforcing easements | | |
| 7 | | ig, inspecting, and enforcing easements du | | |
| 8 | 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? | ed on line 2(d) above satisfy the requirement | | ∟ Yes ∟ No |
| 9 | | n reports conservation easements in its rev the text of the footnote to the organization ation easements. | | |
| Pai | | ections of Art, Historical Treasures, o wered "Yes" to Form 990, Part IV, line 8. | | er Similar Assets. |
| 1a | If the organization elected, as permitted u art, historical treasures, or other similar ass provide, in Part XIV, the text of the footnot | nder SFAS 116, not to report in its revenue ets held for public exhibition, education, or te to its financial statements that describes | researc | ch in furtherance of public service |
| b | provide the following amounts relating to (i) Revenues included in Form 990, Part \(\) | s held for public exhibition, education, or re | esearch | h in furtherance of public service • \$ |
| 2 | | s of art, historical treasures, or other similar | | |
| a b | Revenues included in Form 990, Part VIII, Assets included in Form 990, Part X | line 1 | | |

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| Sched | tule D (Form 990) 2008 | | | | | Page 2 |
| Par | t III Organizations Maintain | ing Collections | of Art, Historica | Treasures, or | Other Similar As | sets (continued) |
| 3 | Using the organization's accession items (check all that apply): | | | | | |
| a b c 4 | Public exhibition Scholarly research Preservation for future genera Provide a description of the organiz Part XIV. | | e 🗌 o | | | |
| 5 | During the year, did the organization assets to be sold to raise funds rather | r than to be mainta | ained as part of the | e organization's col | lection? | Yes No |
| Pai | Trust, Escrow and Cust Part IV, line 9, or reporte | odial Arrangemed an amount on | ents. Complete if Form 990, Part X | organization ans | swered "Yes" to F | Form 990, |
| | Is the organization an agent, truste included on Form 990, Part X? | | | | | Yes No |
| b | If "Yes," explain the arrangement in | Part XIV and cor | mplete the following | | | ount |
| d e f 2a | Beginning balance | | | | | ☐ Yes ☐ No |
| | t V Endowment Funds. Co | | zation answered | l "Yes" to Form | 990 Part IV line | 10 |
| | Endownent Fands. Oc | (a) Current year | (b) Pnor year | (c) Two years back | (d) Three years back | (e) Four years back |
| | Beginning of year balance Contributions | | | | | |
| g | Administrative expenses End of year balance | | | | | |
| 2 a b c | Provide the estimated percentage of Board designated or quasi-endown Permanent endowment ▶ | nent ▶% 6 | % | at are held and ode | ninictared for the | |
| 34 | We mere euromment inna nor iu n | ie hossessinii oi (i | ie organization the | it ale lielu aliu aul | ministered for title | V At- |

| ь 4 | | tions listed as require | ed on Schedule R? | | 3a(i) 3a(ii) 3b | Yes | No |
|--------|--|--------------------------------------|---------------------------------|------------------|-----------------------|---------|------|
| Pa | t VI Investments—Land, Buildin | gs, and Equipmen | t. See Form 990, | Part X, line 10. | | | |
| | Description of investment | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Depreciation | (d) Boo | k value | € |
| b d | Land | 19,370 | | 14,842 | 4, | 528 | |
| | II. Add lines 1a-1e (Column (d) should equal | Form 990, Part X, colui | mn (B), line 10(c).) . | | | 4 | ,528 |

| Page | 3 |
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| | <u>, line 12.</u> |
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| (b) Book value | (c) Method of valuation Cost or end-of-year market value |
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| 1 0 - F 000 D-4 V | / line 10 |
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| (b) Book value | (c) Method of valuation Cost or end-of-year market value |
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| t X, line 15. | |
| (a) Description | (b) Book value |
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| (R) line 15.) | |
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In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

| Page | • |
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| Par | Reconciliation of Change in Net Assets from Form 990 to Financial Statement | ts |
|----------|---|-------------------------|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 1 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 2 |
| 3 | Excess or (deficit) for the year. Subtract line 2 from line 1 | 3 |
| 4 | Net unrealized gains (losses) on investments | 4 |
| 5 | Donated services and use of facilities | 5 |
| 6 | Investment expenses , | 6 |
| 7 | Prior period adjustments | 7 |
| 8 | Other (Describe in Part XIV) | 8 |
| 9 | Total adjustments (net). Add lines 4–8 | 9 |
| 10 | Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 | 10 |
| Par | t XII Reconciliation of Revenue per Audited Financial Statements With Revenue | e per Return |
| 1 | Total revenue, gains, and other support per audited financial statements | 1 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | |
| а | Net unrealized gains on investments | -{ |
| b | Donated services and use of facilities | - |
| C | recoveres of prior year grants | |
| d | Other (Describe III Fart XIV) | 2e |
| | | 3 |
| 3 | Subtract line 2e from line 1 | |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | 1 |
| a | investment expenses not included on Form 990, Fact vin, inte 70 . | ┥ |
| C | Other (Describe in Part XIV) | |
| 5 | Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) | |
| Par | Reconciliation of Expenses per Audited Financial Statements With Expense | |
| 1 | Total expenses and losses per audited financial statements | 1 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | |
| а | Donated services and use of facilities | |
| b | Prior year adjustments | _ |
| С | Losses reported on Form 990, Part IX, line 25 | _ |
| d | Other (Describe in Part XIV) | |
| е | Add lines 2a through 2d | 2e |
| 3 | Subtract line 2e from line 1 | 3 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | 1 1 |
| а | Investment expenses not included on Form 990, Part VIII, line 7b . 4a | _ |
| þ | Other (Describe in Part XIV) | - _ |
| | Add lines 4a and 4b | 4c |
| 5 Par | Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.) | 5 |
| | | and 4: Don't IV June 11 |
| | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. | |
| u 10 | 20, 1 are 4, into 4, 1 are X, 1 are Xi, into 0, 1 are Xii, into 20 and 10, and 1 are Xiii, into 20 and 40. | |
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| Schedule D (For | m 990) 2008 | Page 5 |
|-----------------|---|---------------|
| Part XIV | m 990) 2008 Supplemental Information (continued) | |
| i di t Aiv | Cappemental Information (Continued) | |
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SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

20**08**

Open To Public

| C.S. Lewis Institute, Inc. | | | | | 54 | 1802015 |
|---|---|--|--|---|---|---|
| Part I Fundraising Activitie | s. Complete | f the orga | nization a | answered "Yes" | to Form 990, Par | t IV, line 17. |
| Indicate whether the organizational Mail solicitations Email solicitations Phone solicitations In-person solicitations Did the organization have a writted or key employees listed in Form If "Yes," list the ten highest paid to be compensated at least \$5, | en or oral agree 990, Part VII) o d individuals o | e / f _ g / ement with a or entity in c | Solicitation Solicitation Special form Speci | on of non-governr on of government fundraising events ual (including office with professional) pursuant to agre | nent grants grants ers, directors, trustefundraising services | es 5? |
| (i) Name of individual or entity (fundraiser) | (ii) Activity | (iii) Did fundraiser have custody or control of contributions? | | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col (i) | (vi) Amount paid to (or retained by) organization |
| | | Yes | No | | | |
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| 3 List all states in which the organ registration or licensing. | | | | solicit funds or h | nas been notified it | is exempt from |
| Virginia, Maryland & Georgia | | | | | | |
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| | | more than \$15,000 on F | orm 990-EZ, line 6a. L | ist events with gross r | eceipts greater than t | \$5,000. | | | |
|-----------------|--------|--|---------------------------|--|------------------------|--|------------------------------------|---------------|----------|
| | | | (a) Event #1 Banquet | (b) Event #2 | (c) Other Events | (d) 1 (Add c | Fotal Eve ol (a) th col (c)) | | |
| ø. | | | (event type) | (event type) | (total number) | - | | | |
| Revenue | 1 | Gross receipts | 20,540 | | | <u> </u> | | 20, | 540 |
| æ | 2 | Less: Charitable contributions | | | | | | _ | |
| | 3 | Gross revenue (line 1 minus line 2) | 20,540 | | | <u> </u> | | 20, | 540 |
| | 4 | Cash prizes | | | | | | | <u>/</u> |
| enses | 5 | Non-cash prizes | | | | - | | | |
| Direct Expenses | 6 | Rent/facility costs | 24,570 | | | | | 24, | 570 |
| Š | 7 | Other direct expenses | 11,411 | | <u> </u> | + | | 11, | 411 |
| | 8 9 | Direct expense summary. Ad Net income summary. Comb | | olumn (d) | | (| | 35,9 (15,4 | |
| Pa | rt II | | the organization ansv | vered "Yes" to Form | 990, Part IV, line 19 | , or rep | | | |
| Revenue | | | (a) Bingo | (b) Pull tabs/Instant bingo/progressive bingo | (c) Other gaming | | otal gam | | |
| Ř | 1 | Gross revenue | | | | | | | |
| Ses | 2 | Cash prizes | | | | | | _ | |
| Direct Expenses | 3 | Non-cash prizes | | | | - | | | |
| Direc | 4 | Rent/facility costs | | | | | _ | | |
| | 5 | Other direct expenses . | - O | | <u> </u> | - | | | |
| | 6 | Volunteer labor | ☐ Yes% | ☐ Yes% | ☐ Yes% ☐ No | | | | |
| | 7 | Direct expense summary. Ac | ld lines 2 through 5 in c | olumn (d) | | (| | _ |) |
| | 8 | Net gaming income summar | y. Combine lines 1 and | 7 ın column (d) | | <u> </u> | | | |
| _ | ~ | | | | | | | Yes | No |
| 9 a | | nter the state(s) in which the c the organization licensed to c | | | | | 9a | | |
| b | | "No," Explain: | | | | | | | |
| ıΩa | ···· | ere any of the organization's | namina licenses revoke | d suspended or termin | ated during the tay ve | | 10a | | |
| | | "Yes," Explain: | - | | | | | | |
| | | | | | | | 11 | | |
| 1 | | oes the organization operate of | | | | | | | |

| | | P | age 3 |
|---|-----|-----|-------|
| | | Yes | No |
| 13a % 13b % s gaming/special events books | | | |
| | | | |
| organization receives gaming | 15a | | |
| and the | | | |
| | | | |
| | | | |

Schedule G (Form 990 or 990-EZ) 2008

13 Indicate the percentage of gaming activity operated in:

*SCHEDULE O (Form 990)

Supplemental Information to Form 990

2008

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number C.S. Lewis Institute, Inc. 1802015 Section B. 12. The Institute has a written conflict of interest policy which has been recently implemented. Individual individual board of director members and officers must sign annually agreeing to the policy and indicating no personal conflicts of interest. Section B. 15. The Institute has an active Board of Directors and Executive and Finance Committee which reviews all officers' compensation and policies and procedures. Section C. 19. The Institute makes its documents and financial statements available to the public through its website and upon written request to the Institute.

| Schedule O (Form 990) 2008 | | Page Z |
|----------------------------|--------------------------------|-----------|
| Name of the organization - | Employer identification number | |
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