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## **Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury ▶ The organization may have to use a copy of this return to satisfy state reporting requirements For the 2008 calendar year, or tax year beginning 2008, and ending September 1 August 31 20 09 D Employer identification number C Name of organization Racine Society For Christian Instruction Check if applicable Doing Business As 0932603 Address change label or Number and street (or P O box if mail is not delivered to street address) Telephone number print or Room/suite Name change type. 912 Virginia Street 262) 634-0961 Initial return Specific City or town, state or country, and ZIP + 4 ☐ Termination Instruc Racine, WI 53405 tions. 947.843 Amended return G Gross receipts \$ F Name and address of principal officer: Tim Joosse - President Application pending H(a) Is this a group return for affiliates? Yes Address Same As C Above H(b) Are all affiliates included? ☐Yes ☐ No Tax-exempt status: 4947(a)(1) or If "No," attach a list (see instructions) Website: ▶ H(c) Group exemption number ▶ Type of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation: 1924 M State of legal domicile: WI Part I Summary Briefly describe the organization's mission or most significant activities: Elementary Christian Education K-8 Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its assets. 3 3 Number of voting members of the governing body (Part VI, line 1a). රේ 4 9 Number of independent voting members of the governing body (Part VI, line 1b) 5 26 Total number of employees (Part V, line 2a). Total number of volunteers (estimate if necessary) 6 150 7a Total gross unrelated business revenue from Part XIII, line 12, column (C) 7a 0 Net unrelated business taxable income from Form 990-T, line 34, 7h 0 Prior Year Current Year 141,158 132,634 Contributions and grants (Part VIII, line 1h) 719.325 765,207 9 Program service revenue (Part VIII, line 2g) . . . Investment income (Part VIII, column (A), lines 3, 4, and 7d) 36.970 36.188 10 7,639 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11,998 11 Total revenue-add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 909,451 941,668 0 0 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 Benefits paid to or for members (Part IX, column (A), line 4) . . . 638.124 616,194 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . . . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶ 286,082 240,822 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . 902,276 878,946 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). Revenue less expenses. Subtract line 18 from line 12 7,175 62.722 5 Beginning of Year End of Year Assets Balanc 1,519,875 1,582,597 Total assets (Part X, line 16) . 1,000 1,000 Total liabilities (Part X, line 26) 21 Net assets or fund balances. Subtract line 21 from line 20 1,518,875 1,581,597 Part II Signature Block Under penalties of e-riury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is face, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Here Treasurer Robert Type or print name and title Check if Date Preparer's identifying number Preparer's selfsignature employed ▶ 🗌 **Paid** Preparer's Firm's name (or yours **EIN** Use Only if self-employed), address, and ZIP + 4 Phone no ► (

Yes

No

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

Par	Statement of Program Service Accomplishments (see instructions)	
1	Briefly describe the organization's mission:  To provide covenant youth with instruction that is fully in harmony with the word of God, and that w to serve God effectively in His 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?	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	☐ Yes ☑ No
4	Describe the exempt purpose achievements for each of the organization's three largest program services. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amo allocations to others, the total expenses, and revenue, if any, for each program service reported.	s by expenses. unt of grants and
4a	(Code: ) (Expenses \$ 851,854 including grants of \$ 0 ) (Revenue \$ Provided Christian Education Grades K - 8 To 191 Students	
		·
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)	
	·	
	(Code: ) (Expenses \$ including grants of \$) (Revenue \$	)
	(Josephine V	
Δd	Other program services. (Describe in Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses ▶ \$ 851,854 (Must equal Part IX, Line 25, column (B).)	

Par	t IV 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		1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
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		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		✓_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		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	>	
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	1	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13	<b>✓</b>	
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		<b>✓</b>
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	-	✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16 17		1
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<b>▼</b>
18 19	Did the organization report more than \$15,000 total on Part VIII, lines 10 and 6a? 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 1? 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 27 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		1
24a				
	\$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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	ļ ——	<b>Y</b>
С	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
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	<b>-</b>
25a	<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? 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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		1

Part 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 a 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, 1 28a b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," 28b Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a 28c professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV . . . 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I . . . . . . . . . . . . . Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 35 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 organization? If "Yes," complete Schedule R, Part V, line 2. Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37

Form **990** (2008)

Par	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			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
24	Statements, filed for the calendar year ending with or within the year covered by this return 2a 26			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓	<u> </u>
	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?	За		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
Tu	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.			_
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>√</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<b>✓</b>
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		<b>✓</b>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
	The Test, indicate the number of Forms 0202 med during the year.			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<b>-</b>
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7 <u>g</u>		-
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section	l		
	<b>509(a)(3) supporting organizations.</b> 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.			
а	Did the organization make any taxable distributions under section 4966?	9a	-	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	-	ļ -
10	Section 501(c)(7) organizations. Enter:			
a	Initiation lees and capital contributions included on fair vin, line 12			
b	Gross receipts, included on Form 950, Fair Vin, line 12, for public use of olds receipted	ſ		
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members of shareholders	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u></u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b			

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

<u> 5ec</u>	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	1		
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		✓
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		<b>✓</b>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		<b>✓</b>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<b>✓</b>
6	Does the organization have members or stockholders?	6	✓	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	1		
	of the governing body?	7a	<b>\</b>	ļ
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	<b>\</b>	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
•	the year by the following:	ł		
а		8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	1	
9a		9a		1
d	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	1	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		✓_
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	✓	
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
C	describe in Schedule O how this is done	12c	✓	
13	Does the organization have a written whistleblower policy?	13		✓
14	Does the organization have a written document retention and destruction policy?	14	<b>✓</b>	
15	Did the process for determining compensation of the following persons include a review and approval by			
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision.		ļ	
9	The organization's CEO, Executive Director, or top management official?	15a		✓
- L	Other officers or key employees of the organization?	15b		1
D	Describe the process in Schedule O (see instructions)			<u> </u>
16.	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
Ioa		16a		1
_	with a taxable entity during the year?			<u> </u>
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		
Sec	etion 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			
	available for public inspection. Indicate how you make these available. Check all that apply.	(3)(3)3	J. 1157	
	Own website Another's website Upon request			
10	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of int	oraet	
19	policy, and financial statements available to the public.		Cital	
20	State the name, physical address, and telephone number of the person who possesses the books and rec	ords s	f tha	
20	organization:   Barbara Vanderleest, 1711 Heinze Drive, Racine, WI 53406			

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not co	mpensate	any o	offic	er,	dire	ctor,	trus	tee, or key em	ployee.	
(A)	(B)			(6	C)			(D)	(E)	(F)
Name and Title	Average		on (c		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
Timothy Joosse - President					<b>-</b>					
4232 Garden Drive, Racine, WI 53403	3	1		✓	_			-0-	-0-	-0-
Debra Mulder - Vice President	1	_		,				-0-	-0-	-0-
1106 Blaine Avenue, Racine, WI 53405		<b>/</b>	_	✓	-		_			
Eric Mulder - Secretary 1425 Warwick Way Apt 105, Racine, WI 53406	1	1		1				-0-	-0-	-0-
Bob Friesema - Treasurer 6058 Churchwood Cir, Greendale, WI 53129	4	1		1				-0-	-0-	-0-
Kari Farrington	1			,				-0-	-0-	-0-
1414 Crabapple Drive, Racine, WI 53406 Don Gapko	2	<b>-</b>		-				-0-	-0-	-0-
8735 Old Spring Street, Racine, WI 53406		✓	_				<u> </u>	-0-		
Mike Friesema 1911 Jupiter Avenue, Racine, WI 53406	1	1						-0-	-0-	-0-
Cindi Kramer 804 Monroe Avenue, Racine, WI 53405	1	1						-0-	-0-	-0-
Scott Peterson 3459 East Elmwood Drive, Racine, WI 53406	1	1						-0-	-0-	-0-
										:

Part VII Section A. Officers, Directors, Tru		Emp	loy			d Hig	hest				
(A)	(B)	l			C) 			(D)	(E)		(F)
Name and title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amo of compe fror orgar and	mated bunt of ther ensation m the inization related izations
										_	
											_
			·						_		
1b Total					<u></u>		<b></b>	-0-	-0-	_	0-
2 Total number of individuals (including thos organization ► -0-	e in 1a) wh	no rec	ceiv	ed r	nor	e thar	n \$1	00,000 in repo	ortable compens		
3 Did the organization list any former office	er, director	or tr	uste	ee, l	key	empl	oye	e, or highest o	compensated	3	res No ✓
employee on line 1a? If "Yes," complete S  4 For any individual listed on line 1a, is the s	sum of rep	ortab	le c	om	oen:	sation	anı	d other compe	nsation from	3	
the organization and related organizations individual.										4	<b>/</b>
5 Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," comp	com olete	pen Sch	satı nedu	on ile .	from I for s	any	person	anization for	5	<b>✓</b>
Section B. Independent Contractors  1 Complete this table for your five highest or	omponeato	od inc	lone	nde	ant i	contra	acto	re that receive	d more than \$1	20,000	
compensation from the organization	Unipensate		——				1		———		
Name and business add	dress						_	(B) Description of s	ervices	(C) Compens	ation
NONE							$\vdash$				
		-			_		-			<del></del>	
	<del> </del>						<u> </u>				
2 Total number of independent contractors compensation from the organization ▶ ▶	(including	those	n	1) v	vho	recei	ved	more than \$1	00,000 in		

Total revenue   Total revenu	Part	_	<u> </u>	nue .		<del></del>		<del></del>	, ago o
2a   Tuition	Ir all	<u> </u>	Statement of Neve	mue			Related or exempt function	Unrelated business	Revenue excluded from tax under sections
2a   Tuition	Contributions, gifts, grants and other similar amounts	b c d e f	Membership dues Fundraising events Related organizations . Government grants (contributed All other contributions, gifts, grand similar amounts not included Noncash contributions included in the state of the state	tions). 16 nts, d above 1f	132,634	132 634			
3   Investment income (including dividends, interest, and other similar amounts)		''	Total. Add lines ra-11 .	<u> </u>	Business Code	102,004			
3   Investment income (including dividends, interest, and other similar amounts)	Vел	2a				-			
3   Investment income (including dividends, interest, and other similar amounts)	æ	b	Credit Line Proceeds		900000	100,000	100,000		
3   Investment income (including dividends, interest, and other similar amounts)	vice.	С							
3   Investment income (including dividends, interest, and other similar amounts)	Ser	d			-				
3   Investment income (including dividends, interest, and other similar amounts)	an an	е							
3   Investment income (including dividends, interest, and other similar amounts)	JGO.	f	• •						
Other similar amounts   Oth		9	Total. Add lines 2a-2f .		•	765,207		<del>-</del> -	
1   1   1   1   1   1   1   1   1   1		3				36 188	36 188		
Royalties		١.							
10   Real   (ii)   Personal		1 *		ax-exempt bone	d proceeds				
Second		3	Hoyanies	(i) Real	(u) Personal				
Description		_		• • • • • • • • • • • • • • • • • • • •	(ii) T CISOTILI				
C Rental income or (loss)  d Net rental income or (loss)  7a Gross amount from sales of assets other than inventory  b Less. cost or other basis and sales expenses .  c Gain or (loss)  d Net gain or (loss)  Net gain or (loss)  10 See Part IV, line 18  See Part IV, line 18  C Net income or (loss) from fundraising events  See Part IV, line 19  B Less. direct expenses .  b Less. direct expenses .  c Net income or (loss) from gaming activities  See Part IV, line 19  C Net income or (loss) from gaming activities  See Part IV, line 19  B Less. direct of goods sold  c Net income or (loss) from gaming activities  Net income or (loss) from sales of inventory.  B Less cost of goods sold  c Net income or (loss) from sales of inventory.  Miscellaneous Revenue  Business Code  11a  b  C Total Revenue. Add lines 11a-11d  P Total Revenue. Add lines 11b, 2g, 3, 4, 5, 6d, 7d, 8c,				3,010		ļ	1		
d Net rental income or (loss)				3 610		1			
Ta Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses . c Gain or (loss) . d Net gain or (loss) . d Net gain or (loss) . b Less direct expenses . b Less direct expenses . c Net income or (loss) from fundraising events (not including \$ b Less direct expenses . c Net income or (loss) from fundraising events . d Less direct expenses . b . d Less direct expenses . b . d Less direct expenses . b . c Net income or (loss) from gaming activities . c Net income or (loss) from gaming activities . d Less core of goods sold . c Net income or (loss) from sales of inventory . Miscellaneous Revenue .  Business Code .  11a  d All other revenue e Total. Add lines 11a-11d e Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c,						3 610	3 610		
A dissel allulit intrinsies of assets other than inventory b Less, cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) b 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		ł	· _		<del> </del>	3,010	0,010		
b Less. cost or other basis and sales expenses . c Gain or (loss) . d Net gain or (loss) .		7a	Gross amount from Sales of —	(i) Securities	(ii) Other				1
C Gain or (loss) d Net gain or (loss)  8a Gross income from fundraising events (not including \$		b	Less. cost or other basis						i i
of contributions reported on line 1c). See Part IV, line 18			Gain or (loss) L		▶	0	0		
9a Gross income from gaming activities See Part IV, line 19 a b Less. direct expenses b c Net income or (loss) from gaming activities . ▶ 0 0  10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory ▶ 0  Miscellaneous Revenue Business Code  11a b c d All other revenue		8a	events (not including \$ of contributions reported	on line 1c).					
9a Gross income from gaming activities See Part IV, line 19 a b Less. direct expenses b c Net income or (loss) from gaming activities . ▶ 0 0  10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory ▶ 0  Miscellaneous Revenue Business Code  11a b c d All other revenue	Ë								
See Part IV, line 19 a b Less. direct expenses b c Net income or (loss) from gaming activities • 0 0  10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold . b c Net income or (loss) from sales of inventory . • 0 0  Miscellaneous Revenue Business Code  11a b	ō	C	Net income or (loss) from	ı fundraısıng e	vents . 🕨	4,029	4,029		<u> </u>
c Net income or (loss) from gaming activities . ▶ 0 0 10  10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory ▶ 0 0  Miscellaneous Revenue Business Code  11a			See Part IV, line 19	а					
10a Gross sales of inventory, less returns and allowances							0	<del></del>	
returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory > 0  Miscellaneous Revenue Business Code  11a b c d All other revenue		1	• •						
11a		b	returns and allowances . Less: cost of goods sold Net income or (loss) from s	a b sales of invent	ory <b>&gt;</b>	0	0		
b					Business Code		}		1
C		11a							
d All other revenue		b						<del></del>	<del> </del>
e Total. Add lines 11a–11d ▶ 0  12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c,		C							<del> </del>
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c,		1 -			L				
		е				0			1
		12				941.668	809.034	0	0

Part IX Statement of Functional Expenses

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

	All other organizations must complete col	umn (A) but are no	required to comp	piete columns (B), (	(U), and (U).
	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	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				· · · · · · · · · · · · · · · · · · ·
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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
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	502,863	477,860	25,003	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	14,565	14,565		
9	Other employee benefits	83,508	83,508		
10	Payroll taxes	37,188	35,275	1,913	
11	Fees for services (non-employees):			]	
а	Management				
b	Legal				
C	Accounting	4,550		4,550	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				<del></del>
g	Other	5 747	5 747		
12	Advertising and promotion	5,717	5,717		
13	Office expenses	23,718 422	23,718		
14	Information technology	422	422		<u> </u>
15	Royalties	166,215	166,215		
16	Occupancy	100,213	100,213		
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	2.005	2.005		
19	Conferences, conventions, and meetings .	2,095	2,095		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization.	-			
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	Textbooks	20,149	20,149		
b	Teacher Training	3,125	3,125		
c					-
d					
e					
f	All other expenses Miscellaneous	14,831	14,831		
25	Total functional expenses. Add lines 1 through 24f	878,946	847,480	31,466	
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				

ra	rrv	balance Sneet					
			<b>(A)</b> Beginning of year		(B End of	) year	
	1	Cash—non-interest-bearing	83,666	1		104	,503
	2	Savings and temporary cash investments	21,135	2			,404
	3	Pledges and grants receivable, net	<del>.</del>	3			
	4	Accounts receivable, net		4			
1	5	Receivables from current and former officers, directors, trustees, key					
ŀ	•	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					
l		Part II of Schedule L		6 _			
sts	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
•	9	Prepaid expenses and deferred charges		9			
	10a	Land, buildings, and equipment: cost basis 10a 825,940					
	b		825.940	40		025	040
		Fait VI OI Schedule D	589,135				<u>,940</u> ,750
	11	Investments—publicly traded securities	509,135	12		010	,730
	12	Investments—other securities. See Part IV, line 11		13	-		
	13 14	Investments—program-related. See Part IV, line 11		14			
	15	Intangible assets		15		-	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,519,876			1,582	,597
	17	Accounts payable and accrued expenses		17			
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
ies	21	Escrow account liability. Complete Part IV of Schedule D	<del> </del>	21		_	
Liabilities	22	Payables to current and former officers, directors, trustees, key					
jat		employees, highest compensated employees, and disqualified		00			
-		persons. Complete Part II of Schedule L	1.000	22 23		4	,000
	23	Secured mortgages and notes payable to unrelated third parties		23		1	,000
	24	Unsecured notes and loans payable		25			
	25 26	Total liabilities. Add lines 17 through 25	1,000			1	.000
		Organizations that follow SFAS 117, check here ▶ ☑ and				<del>.</del>	1
lances		complete lines 27 through 29, and lines 33 and 34.					
an	27	Unrestricted net assets	929,658	27		959	,343
Bal	28	Temporarily restricted net assets		28			
Б	29	Permanently restricted net assets	589,218	29		622	,254
Net Assets or Fund Ba		Organizations that do not follow SFAS 117, check here ▶ □					
ō		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds		30			
SS	31	Paid-in or capital surplus, or land, building, or equipment fund .	<del></del>	31			
t A	32	Retained earnings, endowment, accumulated income, or other funds	4 540 076	32		4 504	507
ž	33 34	Total net assets or fund balances	1,518,876 1,519,876			1,581 1,582	_
Ρa	rt XI		1,519,070	<u> </u>		1,002	,001
	, A.	Thurida electronic and reporting				Yes	No
1	Acc	ounting method used to prepare the Form 990: 🗹 Cash 🛛 Accrual	☐ Other				
2a		re the organization's financial statements compiled or reviewed by an ind		t? , ,	2a	✓	
b		re the organization's financial statements audited by an independent according			2b		<u> </u>
С	f "Y	'es" to lines 2a or 2b, does the organization have a committee that assumes	responsibility for overs			_	
		audit, review, or compilation of its financial statements and selection of an in			2c	<b>✓</b>	
<b>3</b> a		a result of a federal award, was the organization required to undergo an		forth in			1
L		Single Audit Act and OMB Circular A-133?			3a 3b		
17	, 11 7	rea. Dio nie Diudijkanon underdo nie ledulieu addit or addita!			1 -313		

#### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

### **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 Open to Public

Inspection Internal Revenue Service Employer identification number Name of the organization 0932603 **Racine Society For Christian Instruction** Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) ĸ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) R An organization that normally receives (1) more than 33\% % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33/4 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. 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). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? . . . . . 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above?

i) Name of supported organization			in col (i) his	organization sted in your document?	(v) Did yo the organ col (i) o supp	zation in	(vi) la organizati (i) organiz U S	on in col zed in the	(vii) Amount of support
	_		Yes	No	Yes	No	Yes	No	
								-	-
tal									

Par	Support Schedule for Org (Complete only if you check					and 170(b)(	I)(A)(VI)
Sec	tion A. Public Support				<u>,                                      </u>		
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2004	<b>(b)</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						
4	Total. Add lines 1-3		<u> </u>				
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
<u>6</u>	Public support. Subtract line 5 from line 4.		<u> </u>			<u> </u>	l
	tion B. Total Support				<b></b>		T
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4		ļ				
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>		<u></u>		1
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	re					
Sec	tion C. Computation of Public Su	pport Perce	ntage	·			
14	Public support percentage for 2008 (line	6, column (f) d	livided by line 1	1, column (f))		14	<u> </u>
15	Public support percentage from 2007 Sci	nedule A, Part	IV-A, line 26f			15	%%
16a	33% % support test—2008. If the organiand stop here. The organization qualifies	as a publicly	supported orga	nization			▶ 🗆
b	33% % support test—2007. If the organization quality box and stop here. The organization quality	lifies as a pub	licly supported	organization .			▶ □
17a	10%-facts-and-circumstances test – 20 more, and if the organization meets the "forganization meets the "facts-and-circumstances" facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances" facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances" facts – 20 more, and if the organization meets the "facts-and-circumstances" facts – 20 more, and if the organization meets the "facts-and-circumstances" facts – 20 more, and if the organization meets the "facts-and-circumstances" facts – 20 more, and if the organization meets the "facts-and-circumstances" facts – 20 more, and if the organization meets the "facts-and-circumstances" facts – 20 more, and if the organization meets the "facts-and-circumstances" facts – 20 more, and if the organization meets the "facts-and-circumstances" facts – 20 more, and if the organization meets the "facts-and-circumstances" facts – 20 more, and if the organization meets the "facts-and-circumstances" facts – 20 more, and if the organization meets the "facts-and-circumstances" facts – 20 more, and if the organization meets the "facts-and-circumstances" facts – 20 more, and if the organization meets in the organization meets and if the organi	acts-and-circu	ımstances" test,	check this box	and stop here	. Explain in Part	IV how the
b 18	10%-facts-and-circumstances test—2007 more, and if the organization meets the "forganization meets the "facts-and-circumstate Private foundation. If the organization did	acts-and-circui ances" test. The	mstances" test, e organization qu	check this box a alifies as a public	and <b>stop here.</b> cly supported o	Explain in Part ganization .	IV how the ▶ □
					_		

Par	Support Schedule for Orga (Complete only if you checke				1)(2)		
Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	<u> </u>					
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5					L	
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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	:					
11	Add lines 10a and 10b						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for organization, check this box and stop	here	<u></u>				on 501(c)(3)
Sec	tion C. Computation of Public Su	· ·			<del></del> .	<del></del>	
15 16	Public support percentage for 2008 (lin Public support percentage from 2007 S	Schedule A, Pa	art IV-A, line 2			15 16	<u>%</u> %
Sec	tion D. Computation of Investmen	nt Income P	ercentage				
17	Investment income percentage for 200	8 (line 10c, co	lumn (f) dıvıde	d by line 13, c	olumn (f)) .	17	<u></u>
18	Investment income percentage from 20					18	%_
19a	17 is not more than 331/3 %, check this b	ox and stop h	e <mark>re.</mark> The organ	ızatıon qualıfıes	s as a publicly	supported orga	anızatıon ► 🗆
b	33% % support tests—2007. If the orgar line 18 is not more than 33% %, check this <b>Private foundation.</b> If the organization	s box and <b>stop</b>	here. The orga	ınization qualıfıc	es as a publicly	supported orga	anization >
20_	rivate iounuation. It the organization	ara not check	a DUA UII IIIIB	17, 13a, UI 19L	, CHECK UIIS D	ON BILL SEE IIIS	

chèdule A (F	orm 990 or 990-EZ) 20	008							Page 4
Part IV	Supplemental Part II, line 17	I Information. a or 17b; or Pa	Complete art III, line 1	this part to 2. Provide	provide tany other	the explana additional	ation required information.	by Part II, (see instruct	line 10; tions)
				<del></del>					
		•							
	••	••••							
		•••••							
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				· • • • • • • • • • • • • • • • • • • •					
					•••••				
<b></b>									

#### SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

OMB No 1545-0047

2008

Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

► 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

	ine Society For Christian Instruction	39	0932603
Pai	Organizations Maintaining Donor Advised Funds or Other Similar	Funds o	r Accounts. Complete if
	the organization answered "Yes" to Form 990, Part IV, line 6.		
	(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 he funds are the organization's property, subject to the organization's exclusive legal co		
6	Did the organization inform all grantees, donors, and donor advisors in writing that gused only for charitable purposes and not for the benefit of the donor or donor advisimpermissible private benefit?	sor or oth	er
Pai	t 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)		
·	<ul> <li>□ Preservation of land for public use (e.g., recreation or pleasure)</li> <li>□ Protection of natural habitat</li> <li>□ Preservation</li> <li>□ Preservation</li> <li>□ Preservation</li> </ul>	on of an hi	storically important land area fied historic structure
2	Complete lines 2a–2d if the organization held a qualified conservation contribution in the	e form of a	conservation easement
	on the last day of the tax year.	ı	I I I I I I I I I I I I I I I I I I I
			Held at the End of the Year
a	Total number of conservation easements		2a   2b
b	Total acreage restricted by conservation easements		2c
C	Number of conservation easements on a certified historic structure included in (a) .		2d
d	Number of conservation easements included in (c) acquired after 8/17/06		
3	Number of conservation easements modified, transferred, released, extinguished, or the taxable year $\blacktriangleright$		-
4	Number of states where property subject to conservation easement is located ▶		
5	Does the organization have a written policy regarding the periodic monitoring, inspect enforcement of the conservation easements it holds?		
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing easements du	iring the y	ear▶ \$
8	Does each conservation easement reported on line 2(d) above satisfy the requirement $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(i)$ ?		tion Yes I No
9	In Part XIV, describe how the organization reports conservation easements in its reveloble and include, if applicable, the text of the footnote to the organization the organization's accounting for conservation easements.		
Pai	Organizations Maintaining Collections of Art, Historical Treasures, of Complete if the organization answered "Yes" to Form 990, Part IV, line 8.		imilar Assets.
1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue art, historical treasures, or other similar assets held for public exhibition, education, or provide, in Part XIV, the text of the footnote to its financial statements that describes	research i	n furtherance of public service,
b	If the organization elected, as permitted under SFAS 116, to report in its revenue state historical treasures, or other similar assets held for public exhibition, education, or reprovide the following amounts relating to these items:  (i) Revenues included in Form 990, Part VIII, line 1	esearch in	furtherance of public service.  • \$
2	If the organization received or held works of art, historical treasures, or other similar following amounts required to be reported under SFAS 116 relating to these items:		
а	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		. > \$

Page	2
raye	-

Par	t III Organizations Maintain	ing Collections	of Art, His	storical	Treasure	s, or C	ther Similar	Assets	(contir	nued)
3	Using the organization's accession items (check all that apply):	and other record	s, check a	ny of th	e following	that ar	e a significant	t use of	its coll	ection
а	Public exhibition d Loan or exchange programs									
b	Scholarly research		е		ther					
C	Preservation for future generations									
4	Provide a description of the organizer XIV.	zation's collections	s and expl	aın how	they furthe	r the o	rganization's e	exempt	purpos	e in
5	During the year, did the organization assets to be sold to raise funds rather	er than to be mainte	ained as pa	art of the	organizatio	n's coll	ection?	. 🔲	Yes [	☐ No
Par	Trust, Escrow and Cust Part IV, line 9, or reporte					on ans	wered "Yes"	to Form	ı 990, ——	
								not _	Yes [	□ No
b	If "Yes," explain the arrangement in	n Part XIV and cor	mplete the	followin	ig table:		1	A		
						100	1	Amount		
С	Beginning balance					. 1c	<del></del>			
d	Additions during the year						- 1			
е	Distributions during the year					. <u>1e</u>				
f	•					. <u>1f</u>			Г. Г	
b	Did the organization include an am If "Yes," explain the arrangement in	n Part XIV.						. L	Yes L	No
Pai	t V Endowment Funds. Co		Τ.							<del></del>
		(a) Current year	(b) Prior	year	(c) Two year	s back	(d) Three years be	ack (e)	Four year	s back
1a	Beginning of year balance	589,218								
b	Contributions	39,102	<u> </u>		***			$-\!\!\!\!+\!\!\!\!-$		
С	Investment earnings or losses .	35,919								
d	Grants or scholarships					-		<del></del>		
е	Other expenditures for facilities and programs	40,247								
f g	Administrative expenses End of year balance	1,738 622,254								
2	Provide the estimated percentage of	of the year end ba	alance held	as:						
а	Board designated or quasi-endown	nent ▶	%							
b	Permanent endowment ► 100	%								
С	Term endowment ▶9	%								
3a	Are there endowment funds not in the	he possession of t	he organiza	ation tha	t are held a	nd adm	ninistered for th	те		<del></del>
	organization by:							[	Yes	No
	(i) unrelated organizations .							-	a(i)	+
				. • <u>.</u> .					a(ii)	<b>✓</b>
b	If "Yes" to 3a(II), are the related org							. 3	Bb	
4	Describe in Part XIV the intended to					Port V	lino 10			
Pal	t VI Investments—Land, B		· ·		T					
	Description of investment	(a) Cost or o			st or other s (other)	(c) (	Depreciation	(d)	Book valu	ue
1a	Land				,000				75,000	
b	Buildings			750	0,000			7	50,940	
С	Leasehold improvements									
d	Equipment									
	Other	<u> </u>								
Tota	I. Add lines 1a-1e. (Column (d) should	equal Form 990, Pa	art X, colum	ın (B), lın	e 10(c).) .	• • •	▶		82	5,940

Part VII Investments—Other Securities	s. See Form 990, Part X	, line 12.	rage <b>U</b>		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year ma	ation rket value		
Financial derivatives and other financial products					
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)					
Part VIII Investments - Program Relate	ed. See Form 990, Part X	, line 13.			
(a) Description of investment type	(b) Book value	(c) Method of value Cost or end-of-year ma			
<del></del>					
Total. (Column (b) should equal Form 990, Part X, col (B) line 13.)	1 1 15				
Part IX Other Assets. See Form 990, P	art X, line 15.  (a) Description		(b) Book value		
<del></del>					
Total. (Column (b) should equal Form 990, Part X, c					
Part X Other Liabilities. See Form 990					
(a) Description of liability Federal income taxes	(b) Amount				
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 ) ▶					
In Part XIV, provide the text of the footnote to the uncertain tax positions under FIN 48.	e organization's financial sta	tements that reports the organiza	ation's liability for		

Page	4

Par	t XI 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
Pai	t XII Reconciliation of Revenue per Audited Financial Statements With Revenu	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	-
þ	Donated services and use of facilities	<b>-</b>
C	Recoveries of prior year grants	_
d	Other (Describe in Part XIV)	-  <sub>0-</sub>
е	Add lines 2a through 2d	2e 3
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a	investment expenses not included on Form 990, Part VIII, line 70	
b	Other (Describe in Part XIV)	4c
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	
Pai	T XIII 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 <b>2e</b> from line <b>1</b>	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	_
b	Other (Describe in Part XIV)	<b>-</b>   <b>.</b> .
_	Add lines 4a and 4b	4c
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	] 3
		and 4. Dort IV Junes 1h
	iplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a 2b; Part V, line 4; Part X, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	
u.10	20, 1 art v, into 4, 1 art XI, 1 art XII, into 0, 1 art XIII, into 2a arta 15, arta 1 art XIII, into 2a arta 15	
The	e intended use of the endowment fund is to lower tuition cost to all students by using the inv	restment income
ŶO.	offset the operational costs of the school.	

Schedule D (For	rm 990) 2008	Page <b>5</b>
Part XIV	Supplemental Information (continued)	
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	***************************************	
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	•••••••••••••••••••••••••••••••••••••••	
<b></b>		••••••

#### SCHEDULE E (Form 990 or 990-EZ)

#### **Schools**

▶ To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

2008

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Form 990, Part IV, line 13, or Form 990-EZ, Part VI
 Attach to Form 990 or Form 990-EZ.

0932603 39 **Racine Society For Christian Instruction** YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? . . . . . . . . . . Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, 2 programs, and scholarships? Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please 3 ✓ describe. If "No," please explain Any newspaper ads state that the school does not discriminate based on race. Does the organization maintain the following? 4a a Records indicating the racial composition of the student body, faculty, and administrative staff? . b Records documenting that scholarships and other financial assistance are awarded on a racially 4b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 4c 4d **d** Copies of all material used by the organization or on its behalf to solicit contributions? . . . . . . If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) Does the organization discriminate by race in any way with respect to: ✓ Students' rights or privileges? 5b Admissions policies? 5c Employment of faculty or administrative staff? . . . . . 5d Scholarships or other financial assistance? . . 5е Educational policies? 5f Use of facilities? . 5g Athletic programs? 5h If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) 6a 6a Does the organization receive any financial aid or assistance from a governmental agency? . . . . 6b **b** Has the organization's right to such aid ever been revoked or suspended? . . . . . . . . If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation.

#### SCHEDULE O (Form 990)

# **Supplemental Information to Form 990**

OMB No 1545-0047

Open to Public Inspection

0932603

Employer identification number

39

Department of the Treasury Internal Revenue Service Name of the organization

**Racine Society For Christian Instruction** 

► 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.

Part VI Section A Item 6 - The organization has voting members that elect the Board Of Directors and also vote on any
items of business requiring a membership vote at the annual meeting.
Part VI Section A Item 7a - The organization has voting members that elect one third of the Board Of Directors at the
annual meeting for a three year term.
·
Part VI Section A Item 7b - The organization has voting members that approve the annual budget recommended by the
Board Of Directors and also any items of business requiring a membership vote at the annual meeting (e.g. Constitution
Amendment).
Part VI Section A Item 10 - The organizations Form 990 is prepared and reviewed by the Finance Committee of the
governing body. The Form 990 is available for inspection by any member of the governing body (i.e. board).
Part VI Section B Item 12c - As the new board of directors is formed each year the conflict of interest policy is reviewed
and any conflicts of interest would require disclosure and non-participation in related decisions.
Part VI Section B Item 15 - There is only 1 compensated management employee and that is the Principal. None of the
Board of Directors are compensated. The compensation for the Principal is established by the Finance Committee and
approved by the Board Of Directors. The Compensation Committee and Finance Committee use comparability data
from Christian Schools International in establishing employee salaries. The compensation of the Principal is well below
the minimum IRS definition of salary of key employees.

Schedule O (Form 990) 2008		·	<del></del>	Page 2
Name of the organization		yer identific	ation number	
Racine Society For Christian Instruction	39	<u> </u>	0932603	
Part VI Section C Item 19 - The organizations governing documents, conflict of interest po	licy an	d financi	al statemer	nts
are available on request. A notice to parents and organization members is given that the p	ublish	ed financ	ial stateme	nts
are available on request.				
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