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Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2010

Open to Public

Department of the Treasury Internal Revenue Service

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

\overline{A}	For the	2010 cale	ndar year, or ta		innina	September	1 2	010. ar	nd ending	Auc	ust 31	, 20 11	
<u>B</u>			C Name of organiz						ia citating	, Aug	_	yer identification r	umber
		applicable:	Doing Business		ine society	TOI CITISTIA	i iiisa actioi	· · · · · · · · · · · · · · · · · · ·		·	1	39 0932603	
	Address o	•	Number and stre		v if mail is not	delinered to eta	est address)		Room/suit		E Teleph	one number	
님	Name cha	_		•	/A II III AII IS II U	Cenvered to save	et auuress)		1100112 Suit	•	L relepti		
	Initial retu		912 Virginia									262 634 0961	
닏	Terminate		City or town, sta		y, and 21P + 4	•							
Ш	Amended	return	Racine, WI								G Gross		868,051
Ш	Application	on pending	F Name and add			_				H(a) Is thi	s a group retur	n for affiliates? 🔲 Ye	s 🗹 No
			713 Imperial Dr	rive, Racin	e, WI 53402	<u> </u>				· ·	all affiliates i		s 🗌 No
<u></u>	Tax-exem	npt status:	√ 501(c)(3)		501(c) () 🗲 (insert n	o.) 🔲 4947(a))(1) or	527	If "I	No," attach a	a list. (see instructio	ns)
J	Website	e: >								H(c) Gro	up exemptio	on number 🕨	
K	Form of or	rganization:	Corporation	Trust [Association	☐ Other ►		L Yea	ar of forma	tion: 1924	M State	e of legal domicile:	WI
Р	art I	Summ	ary										
_			scribe the org	anization'	s mission o	or most sign	ificant activ	vities:	Elemer	tary Christ	ian Educa	ntion	
	1		rten Through 8			.							
ည္	-												
ā													
Activities & Governance	2	Chack th	is box ▶ 🔲 if t	he emanizat	ion discontinu	ed its operation	e or disposed	of more	than 25%	of ite not seed			
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9	l .		of voting mem		-		-						9
jea	1		of independent	_		_	•		-			 	
₹	1		nber of individ	-	•	-	2010 (Part V	v, line	2a) .		. 5		27
Ş			nber of volunte	•				• •			. 6		125
•			elated busines			1361	S-17/ F-1	2	· · ·		. <u>7a</u>		0
<u>^</u>	b	Net unre	ated business	taxable ir	come fron	n Form 1990	F, line 34	S	<u> </u>		. 7b		0
S	į			ear	Current Ye	ear							
Revenue Con	8	Contribu	tions and grant	ts (Part VI		174,228		151,381					
			rogram service revenue (Part VIII, line 2g)										664,502
	10	Investme	nt income (Pai	t VIII, colu	ımn (A), iin	es 3, 4, and	Zd)		I Г		37,701		40,064
) Æ												8,167	
			enue-add line						e 12)		939,346		864,114
_			nd similar amo			~ 					0		0
			paid to or for n						· ·		0		0
			other compens					lines 5	-10 F		606,091	 	619,377
Expenses		-	•	- •	-	•			′ ''''		0	† · · · · · · · · · · · · · · · · · · ·	0
Ē	1		onal fundraising						· ; -	;			
X	1		draising expen	•	-		*****				224.040		187,748
	1		penses (Part IX						⊢		234,040		
			enses. Add lin				olumn (A), II	ine 25)	' · ├-		840,131	+	807,124
		Revenue	less expenses	. Subtrac	t line 18 fro	om line 12	· . · · · ·	• •	· · -		99,215		56,990
Net Assets or Fund Balances									<u> </u>	leginning of C		End of Ye	
Set	20	Total ass	ets (Part X, line	e 16) .					$\cdot \cdot \cdot \mid$		1,681,812	1	,738,801
¥ E	21		oilities (Part X, I	•					· · L		1,000		1,000
Ž	22	Net asse	ts or fund bala	nces. Sub	otract line 2	21 from line	20				1,680,812	11	,737,801
P	art II	Signa	ture Block										
												my knowledge and	l belief, it is
trı	e, correct,	, and comp	lete. Declaration of	preparer (ot	ther than offic	er) is based on	all information	of whic	h preparer	has any knov	vledge.		
			Ed C.	7-							1-11	- 2012	
Sig	าก	Sign	ature of officer							C	ate		-
He	-		RANDY L	FRI	ESEM	A 17	ZEASUE	e 162	_				
			or print name and						-				
_		1 7	pe preparer's nam		Prer	parer's signature			Dat		T	PTIN	
Pa	iid	' ' ' '	to broken a settle	-	[:::*		-		-		Check self-em	□ #	
Pr	epare								L			project	
Us	e Only		•								m's EIN ▶		
		Firm's a	ıddress ▶	at. At				.		Pt	one no.		
Ma	y the IR	S discus	s this return wi	tn the pre	parer show	vn above? (s	see instruct	uons)	<u>· · ·</u>	<u> </u>	<u> </u>		s No
For	Paperw	rork Redu	ction Act Notic	e, see the	separate in	structions.			Cat. No	o. 11282Y		Form S	390 (2010)

	0 (2010)	Page 2
Part l	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III	. 🗆
1	Briefly describe the organization's mission:	<u> </u>
	To provide covenant youth with instruction that is fully in harmony with the word of God, and that will equip them 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?	
	If "Yes," describe these new services on Schedule O.	[₹] NO
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	☑ No
	If "Yes," describe these changes on Schedule O.	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. S	Section
	501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocat	ions to
	others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 772,825 including grants of \$) (Revenue \$ 712,733	`
70	(Code:) (Expenses \$ 772,825 including grants of \$) (Revenue \$ 712,733 Provide Christian education for grades Kindergarten through 8 to 178 students.	,

41.	(O-1	
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
	•••••••••••••••••••••••••••••••••••••••	
40	(Code: \/Evpapace \$ including greats of \$ \/Devapace \$	`
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$,

A - 1	Other and an income (Describe in Orbert 1 Orbert 1	
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
4e		
70	Total program service expenses ► 772,825	

Checklist of Required Schedules

Part IV

			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 3	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	✓	√
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		√
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	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		1
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi- endowments? If "Yes," complete Schedule D, Part V	10	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		✓
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	1	
14 a		14a	<u> </u>	1
b	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	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, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a	· · · · · · · · · · · · · · · · · · ·	20a		1
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some	201		

Part I	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
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		√
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	1
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	!	1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? 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	<u></u>	✓_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	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,"	<u> </u>	l	
	complete Schedule N, Part II	32	<u>L</u>	✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	<u> </u>	1
а	Did the organization receive any payment from or engage in any transaction with a			<u> </u>
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
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	1	 	
J.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	37		/
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	 		Ė
	19? Note. All Form 990 filers are required to complete Schedule O	38	✓	

Form 990 Part	<u> </u>			Page (
	Check if Schedule O contains a response to any question in this Part V			
4 -			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	!		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4.	ŀ	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	-	├
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 27			1
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	İ	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			1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			١,
	account)?	4a	<u> </u>	✓
b	If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		1	
50	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	ŀ	1
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	 -	1
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			İ
	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			ł
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	_		
	and services provided to the payor?	7a		✓
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		1
С	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	1		 •
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	_	1	
•	organization, have excess business holdings at any time during the year?	8	-	-
	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		İ
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	"		
а	Initiation fees and capital contributions included on Part VIII, line 12			1
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b]		
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources		1	1
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	 	-
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	ł	1	
	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a	+	\vdash
а	Note: See the instructions for additional information the organization must report on Schedule O	1.54	 	

b Enter the amount of reserves the organization is required to maintain by the states in which

Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

the organization is licensed to issue qualified health plans

14a

13b

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b be "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change			
	O. See instructions.			[2]
Secti	Check if Schedule O contains a response to any question in this Part VI	<u>···</u>	• •	V
<u> </u>	on A dotterning body and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 9			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 9			
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	~ ~	1
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 governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6	Does the organization have members or stockholders?	6	✓	<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	1	
ь 8	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b	✓	1
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b_	✓	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
40-	Doce the expenientian have level shorters broughts or offiliates?	10a	Yes	No
10a b	Does the organization have local chapters, branches, or affiliates?	IVa		┞
	chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? .	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		۔ ر ا	ال ـ ـ ـ ا
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓_	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done.	12c	1	
13	Does the organization have a written whistleblower policy?	13	<u> </u>	√
14	Does the organization have a written document retention and destruction policy?	14	1	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	✓	
Ь	Other officers or key employees of the organization	15b	<u> </u>	/
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	ا ا		
_	with a taxable entity during the year?	16a		/
b	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the	405		
Section	organization's exempt status with respect to such arrangements?	16b	1	<u> </u>
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(c)(3 for public inspection. Indicate how you make these available. Check all that apply.)s onl	y) ava	ilable
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records			юlicy,
20	organization: ► Barbara Vanderleest, 1711 Heinze Drive, Racine, Wi 53406	or are	•	

Page	7

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - · List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- 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 neither the organization no (A)	(B)							(D)	(E)	(F)
Name and Title	Average hours per		-		_	hat ap		Reportable compensation	Reportable compensation from	Estimated amount of
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Chris Hage - President 713 Imperial Drive, Racine, WI 53402	4	1		1				0	0	C
(2) Garry Friesema - Vice President 6345 South Drive, Racine, WI 53406	2	1		√				0	0	C
(3) Eric Mulder - Secretary 1425 Warwick Way #105, Racine, WI 53406	- 1	✓		v ✓				0	0	C
(4) Randy Friesema - Treasurer 105 Indiana Street, Racine, WI 53405	4	1		1				0	0	C
(5) Scott Tiesman 3614 16th Street, Racine, WI 53406	1	1						0	0	(
(6) Steve Martin 6330 Kinzie Avenue, Racine, WI 53405	3	1						0	o	(
(7) David Webster 3817 Contessa Court, Sturtevant, WI 53177	1	1						0	0	(
(8) Cindy Kramer 804 Monroe Avenue, Racine, WI 53405	1	1						О	0	(
(9) Bonnie Rozanas 828 Kentucky Street, Racine, WI 53405	1	1						o	0	(
(10)	-									
(11)										
(12)	-									
(13)										
(14)	-			<u> </u>						
(15)	·-									
(16)	-			_						

Part	VII Section A. Officers, Directors, Trus	stees, Key	Emplo	уеє	es, e	ınd	Highe	est (Compensated	Employees (c	ontini	ued)		
	(A)	(B)			((>)			(D)	(E)		(F)	
	Name and title	Average hours per	Posit	ion (d	checl	c all t	that app	oly)	Reportable compensation	Reportable compensation f			nated unt of	
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MIS		ot compe fron organ and r	her insation in the ization elated zations	
(17)		-,					8.					<u> </u>		
(18)										-	-			
(19)											-			
(20)	······································										<u> </u>	-		
(21)														
(22)		:												
(23)														
(24)														
(25)														
(26)											\top			
(27)											\dashv			
(28)				-	-	ļ 								
-41		ļ	J	l	l	<u> </u>	<u> </u>	Ļ			_			
1b	Sub-total		 	•	•	•			0	 	0			0
c d	Total (add lines 1b and 1c)	-		•	•	•			0				_	0
2	Total number of individuals (including but reportable compensation from the organi	not limited	d to th				above	e) w	ho received m	ore than \$100),000	in		
	reportable compensation from the organi	Zation					• • • • • •					· · · · · ·	Yes I	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete							mp	oloyee, or high	nest compens	sated	3		✓
4	For any individual listed on line 1a, is the organization and related organizations													
5	individual	or accrue co	 ompe	nsa	tion	 fro	 m anv	 un	 related organiz		ridual	4		✓ <u> </u>
	for services rendered to the organization on B. Independent Contractors									<u> </u>	•	5		<u>/</u>
1	Complete this table for your five highest	compensat	ed in	dep	end	ent	contr	act	ors that receive	ed more than	\$100	0.000 of		
	compensation from the organization.													
	(A) Name and business add	iress							(B) Description of s	ervices		(C) Compens	ation	
None														
								<u> </u>						
2	Total number of independent contractor								ose listed ab	ove) who				

Part	VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts ts	1a	Federated campaigns 1a	··· -				
F	b	Membership dues 1b					
9, E	С	Fundraising events 1c					
# F	d	Related organizations 1d					
S, E	е	Government grants (contributions) 1e					
P is	f	All other contributions, gifts, grants,					
per E		and similar amounts not included above 1f	151,381				
1 t	g	Noncash contributions included in lines 1a-1f: \$		1			
Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a–1f		151,381			
		Tedan / Go III oo Iu II	Business Code	35.,005.			
eur	2a	Tuition	611600	664,502	664,502		
Re.	ь						
8	C		······································	· · · · - · · · · · · · · · · · · · · ·			
eΣ	d						
n S	e		···				
ja Ja	f	All other program service revenue .					
Program Service Revenue	g	Total. Add lines 2a–2f	•	664,502	Į.	······································	<u> </u>
	3	Investment income (including divide		004,502			· · · · · · · · · · · · · · · · · · ·
		and other similar amounts)		40,064	40,064		
	4	Income from investment of tax-exempt bo	1	0	0		<u></u>
	5	Royalties		0	0	···	
		(i) Real	(ii) Personal				
	6a	Gross Rents 3,654					
	b	Less: rental expenses		-			
	C	Rental income or (loss) 3,654	 				
	d	· · · · · · · · · · · · · · · · · · ·	▶	3,654	3,654		1
	7a	Gross amount from sales of (i) Securities	(ii) Other	3,034	3,034		
	- "	assets other than inventory		ŀ			
	b	Less: cost or other basis					
	С	and sales expenses . Gain or (loss)					
	d		•	0	0		i
90							
	8a	Gross income from fundraising					
Other Reven		events (not including \$					
æ		of contributions reported on line 1c).					
Je		See Part IV, line 18 a	8,449				1
₽	b	Less: direct expenses b	3,937				
		Net income or (loss) from fundraising	events . 🕨	4,513			
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a					
	b	Less: direct expenses b					
		Net income or (loss) from gaming activ	/ities ▶	0	0		
	10a	Gross sales of inventory, less		1			
	_	returns and allowances a					
	b	Less: cost of goods sold b		.	_		-
	С	Net income or (loss) from sales of inve			0		
		Miscellaneous Revenue	Business Code			_	
	11a						
	ь						<u> </u>
	C	All all and an arrangement					
	d	All other revenue					
	42	Total Add lines 11a-11d		0	740 700		
	12	Total revenue. See instructions	🕨	864,114	712,733		L

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (A) Total expenses (B) Program service expenses (D) Fundraising (C) Do not include amounts reported on lines 6b, Management and general expenses 7b, 8b, 9b, and 10b of Part VIII. expenses 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 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) . . . Other salaries and wages 494,193 468,624 25,570 R Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . 14,992 14,992 73,400 9 Other employee benefits 73,400 34,835 1,956 10 36,791 Payroll taxes Fees for services (non-employees): Management Legal b 6,774 Accounting 6,774 Lobbying d Professional fundraising services. See Part IV, line 17 e Investment management fees f Other g 12 7.575 7.575 Advertising and promotion . . . 13 Office expenses 28,698 28,698 14 2,607 2,607 Information technology 15 Royalties 77.017 77,017 16 Occupancy 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 1,403 1,403 19 Conferences, conventions, and meetings . 20 21 22 Depreciation, depletion, and amortization . 23 24 Other expenses, Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) **Textbooks** 35,453 35,453 Teacher Training 1,806 1,806 b C d All other expenses 26,414 26,414 26,414 Total functional expenses. Add lines 1 through 24f 807,124 772,825 34,299 25 **Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Ρ	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	188,892	1	220,126
	2	Savings and temporary cash investments	25,265	2	18,340
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ş		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	· · · · · · · · · · · · · · · · · · ·	9	
	10a	Land, buildings, and equipment: cost or			
	 	other basis. Complete Part VI of Schedule D 10a 825,940			
	ł	Less: accumulated depreciation [10b] 0	825,940		825,940
	11	Investments—publicly traded securities	641,714		674,395
	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 16	Other assets. See Part IV, line 11		15 16	
\dashv	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
(n	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	 ·
Liabilities	22	Payables to current and former officers, directors, trustees, key			
폋		employees, highest compensated employees, and disqualified persons.			
Ë		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties [1,000	23	1,000
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,000	26	1,000
Ś		Organizations that follow SFAS 117, check here ▶ ☑ and complete			
ည		lines 27 through 29, and lines 33 and 34.	4 022 220	07	1,061,037
Ē	27	Unrestricted net assets	1,033,239	27 28	1,081,037
Ä	28	Temporarily restricted net assets	648,573		677,764
Ĕ	29	Organizations that do not follow SFAS 117, check here ▶ □ and	- 040,373	25	077,704
Net Assets or Fund Balances		complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
SSG	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ţ	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Ž	33	Total net assets or fund balances	1,680,812		1,737,801
	34	Total liabilities and net assets/fund balances	1,681,812	34	1,738,801

orm 99	90 (2010)			Pa	ge 12
Part	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI			<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		86	4,114
2	Total expenses (must equal Part IX, column (A), line 25)	2		80	7,124
3	Revenue less expenses. Subtract line 2 from line 1	3		5	6,990
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) .	4		1,68	0,812
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		1,73	7,802
Part	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII				
1	Accounting method used to prepare the Form 990:	plain in		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	1	
b	Were the organization's financial statements audited by an independent accountant?		2b		1
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account		2c	1	
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plain in			
đ	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the ye issued on a separate basis, consolidated basis, or both:	ar were			

За

3b

Form **990** (2010)

☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE'A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

2010 Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Name of the organization

Employer identification number 39 0932603

Racine	Society For Chris	stian Instruction							39 093	2603	
Part	Reason f	or Public Cha	rity Status (All orga	nizations	s must c	omplete	this par	t.) See ii	nstruction	ns.	
The or	ganization is not	a private founda	ition because it is: (Fo	r lines 1 t	hrough 1	1, check	only one	box.)			
2 (3 (✓ A school desc✓ A hospital or a✓ A medical rese	ribed in section cooperative ho	hes, or association of 170(b)(1)(A)(ii). (Attac spital service organiza on operated in conjuncte:	ch Schedu ation desc	ule E.) cribed in s	section 1	70(b)(1)(A)(iii).		ii). Enter the	
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)						l in				
	An organization	n that normally	nment or govemmenta receives a substantia ((A)(vi). (Complete Par	l part of					nit or from	the general pul	olic
8	A community	trust described i	n section 170(b)(1)(A))(vi). (Cor	nplete Pa	rt II.)					
9	receipts from support from	activities related gross investme	receives: (1) more that d to its exempt functi ent income and unrel lifter June 30, 1975. Se	ions—sul lated bus	bject to d siness tax	ertain ex cable inc	ceptions ome (les	s, and (2) ss section	no more	than 331/3% of	its
10	🗌 An organizatio	n organized and	operated exclusively	to test fo	or public s	afety. Se	e sectio	n 509(a)(4).		
11	purposes of o	ne or more pub	nd operated exclusive plicly supported organ describes the type of	nizations	described	d in secti	ion 509(a	ı)(1) or se	ection 509	(a)(2). See sect	
e		his box, I certify Indation manage	Type II c that the organization ers and other than one	is not co		irectly or	indirectl	y by one		isqualified perso	ons
f	•	ation received a check this box	a written determinatio	on from t	the IRS t	hat it is	a Type 	I, Type	II, or Type	III supporting	
g	Since August following pers	•	he organization accep	pted any	gift or co	ontributio	n from a	ny of the	•		
	(iii) below,	the governing b	ndirectly controls, eithody of the supported of	organizat	ion?					d Yes I	No.
		•	on described in (i) abo							11g(ii)	
			a person described in							11g(iii)	
<u>h</u>	Provide the fo	llowing informat	ion about the support	ed organi	ization(s).						
(i) N	ame of supported organization	(ii) EIN	(described on lines 1–9 above or IRC section (see instructions))	in col. (i) lis	organization sted in your document?	the organ			(vii) Amount of support		
				Yes	No	Yes	No	Yes	No		
(A)											
(B)											
(C)											
(D)											
(E)											

Part	II Support Schedule for Organiza	rtions Descr	ibed in Sect	ions 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(v	i)
	(Complete only if you checked th						alify under
04	Part III. If the organization fails to	qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	on A. Public Support	(a) 2006	(h) 2007	(a) 2009	(d) 2009	(e) 2010	(f) Total
	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(a) 2009	(e) 2010	(i) 10tai
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 through 3	-					
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)						
6	Public support. Subtract line 5 from line 4.	<u> </u>	<u> </u>	1	<u> </u>	l	<u> </u>
	on B. Total Support	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
_	dar year (or fiscal year beginning in) ► Amounts from line 4	(a) 2006	(6) 2007	(C) 2008	(6) 2009	(e) 2010	(I) TOTAL
7 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 12	Gross receipts from related activities, etc.					12	= E01(a)(2)
13	First five years. If the Form 990 is for the organization, check this box and stop her	-			n, or illtin tax y		on 501(c)(3) ► □
Secti	on C. Computation of Public Suppor			· · · · · ·		<u> </u>	
14	Public support percentage for 2010 (line 6	-		11. column (fl)		14	%
15	Public support percentage from 2009 Sch		7			15	%
16a	331/3% support test—2010. If the organization qual	lifies as a pub	licly supported	l organization			🕨 🗀
b	331/3% support test—2009. If the organicheck this box and stop here. The organic					9 15 is 33 ¹ /3%	or more,
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee Part IV how the organization meets the "factorization"	ets the "facts-	-and-circumsta	ances" test, ch	eck this box a	nd stop here.	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part IV how the organization m supported organization	tion meets the	e "facts-and-c	ircumstances"	' test, check ti	his box and s	a, and line top here.
18	Private foundation. If the organization di	d not check a	box on line 13	3, 16a, 16b, 17	a, or 17b, chec	k this box and	

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Calendar year (or fiscal year beginning in) 1	Secti	on A. Public Support	dilder the te	Sta listed Deli	ow, piease a	omplete Fait		
1 Gifts, grants, contributions, and membership fees reserview. Donat include any musus of grants. ? 2 Gross recepts from admissions, merohandise sold or services performed, or facilities furnished in any activity that is related to the organization's trac-exemple purpose. 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levided for the organization's benefit and either paid to or expended on its behalf. 5 The value of services or facilities furnished by a governmental unit to the organization without charge. 6 Total, Add lines 1 through 5. 7a Amounts included on lines 1, 2, and 3 received from disqualified persons. b Amounts included on lines 1, 2, and 3 received from disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. c Add lines 7a and 7b. 6 Public support (Subtract line 7c from line 6). 9 Amounts from line 6 10a Gross income from infarest, dividends, payments received on securities loans, rents, reyalties and income from similar sources. b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. c Add lines 10a and 10b. 1 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on 12. Other income to 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; 9. 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 17 Investment income percentage from 2009 Schedule A, Part III, line 15 18 Investment income percentage from 2009 Schedule A, Part III, line 16 19 Total Support representage from 2009 Schedule A, Part III, line 16 19 Total Support representage from 2009 Schedule A, Part III, line 16 19 Total Support representage from 2009 Schedule A, Part II			(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandles sold or services performed, or facilities furnished in any activity hat is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levide for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5. 7 A Amounts included on lines 1, 2, and 3 received from disqualified persons b Arounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on lines 2 and 3 received from other than disqualified persons b Arounts included on lines 2 and 3 received from disqualified persons by the second that the second of the second of the second of the amount on lines 2 and 3 received from other than disqualified persons by the second of the amount on lines 2 and 3 received from other than disqualified persons b Arounts included on line 13 for the year c Add lines 7a and 7b. 8 Public support (Subtract line 7c from line 6). 9 Amounts from line 6 9 Amounts from line 6 9 Amounts from line 6 10 Gross income from interest, dividends, payments received on securities loans, rents, royatives and income from similar sources b Unrelated business taxable income (less securities loans, rents, royatives and income from similar sources acquired after June 30, 1975. c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on 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 the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here 15 Public support per	_					· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
sold or sarvices performed, or facilities furnished in any activity that is related to the granization's tax-exempt purpose. 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levided for the organization's benefit and either paid to or expended on its behalf. 5 The value of services or facilities furnished by a governmental unit to the organization without charge. 6 Total. Add lines 1 through 5. 7 Amounts included on lines 1, 2, and 3 received from disqualified persons. b Amounts included on lines 1, 2, and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c. Add lines 7a and 7b. Public support (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) 9 Amounts from line 6. 10 Gross income from interest, dividends, payments received on securities loans, rents, royafties and income from similar sources. b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. c Add lines 10a and 10b. 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV). 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 First five years. If the Form 990 is for the organization is first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here 15 Public support percentage from 2009 Schedule A, Part III, line 15. 16 9 9 Section C. Computation of Public Support Percentage 17 Investment income percentage from 2009 Schedule A, Part III, line 15. 18 1 1945 38 33/36 support tester-2010. (fit or organization of the organization did not check the box on line 14, and line 15 is more than 33'-3%, and line								
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Section C. Computation of Public Support Percentage 15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)	14			n's first, secon	d, third, fourth	, or fifth tax ye	ear as a secti	on 501(c)(3)
Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)								🕨 🗀
Public support percentage from 2009 Schedule A, Part III, line 15	Secti							
Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)								%
17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)						<u> </u>	16	%
Investment income percentage from 2009 Schedule A, Part III, line 17		* * * * * * * * * * * * * * * * * * * *			" 10 1	(0)	1.4=1	
19a 331/3% support tests-2010. If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line								
the state of the s		•						
17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization . \blacktriangleright [198	_						
b 331/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and	h			=		-		_
	D							•
	20		-	_	=			

•		
Sobodulo A (E	Form 990 or 990-EZ) 2010	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	rage 4
	,	
		-
*		

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification numbe Name of the organization **Racine Society For Christian Instruction** 39 0932603 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 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 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure ☐ Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements . . 2a 2b Number of conservation easements on a certified historic structure included in (a) . . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of ☐ Yes ☐ No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) ☐ Yes ☐ No In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

Part	Organizations Maintaining	Collections of A	Art, Historical	Treasures, or	Other Similar A	ssets (conti	inued)
3	Using the organization's acquisition, a collection items (check all that apply):						
а	☐ Public exhibition		d 🗌 Lo	oan or exchange p	orograms		
b	☐ Scholarly research		e 🗌 O	ther			
C	☐ Preservation for future generation	is					
4	Provide a description of the organizati		nd explain how	they further the	organization's exe	mpt purpose	in Part
	XIV.		·	•			
5	During the year, did the organization	solicit or receive o	donations of an	t. historical treasu	res. or other simi	lar	
_	assets to be sold to raise funds rather						□No
Part			<u>-</u>				
T GIT	line 9, or reported an amount			gamzation and	10104 100 101	0 000,	,
	Is the organization an agent, trustee,			for contributions	or other assets r		
10	included on Form 990, Part X?					☐ Yes	□ No
_	•						
b	If "Yes," explain the arrangement in Pa	in Aiv and comple	ste the following	i labie.		Amount	
				<u> -</u>			
C	Beginning balance				1c		
đ	Additions during the year				1d		
е	Distributions during the year			_	1e		
f	Ending balance				1f		
2 a	Did the organization include an amoun		art X, line 21? .			. 🗌 Yes	∐ No
	If "Yes," explain the arrangement in Pa						
Part	V Endowment Funds. Comple						
		(a) Current year	(b) Pnor year	(c) Two years bac	k (d) Three years ba	ck (e) Four yea	ars back
1a	Beginning of year balance	648,573	622,25	589,2	18		
b	Contributions	30,492	31,79	39,1	02		
C	Net investment earnings, gains, and						
	losses	39,985	37,52	20 35,9	19		
d	Grants or scholarships						
е	Other expenditures for facilities and						
	programs	41,000	40,50	00 40,2	47	}	•
f	Administrative expenses	286	2,50	 			1
g	End of year balance	677,764		_ 			
2	Provide the estimated percentage of the			<u> </u>	<u>- 1</u>	<u>.</u>	
a	Board designated or quasi-endowmen						
a b			70				
_	Permanent endowment ► 19	DU 70					
C	Term endowment ▶ % Are there endowment funds not in the	noncoccion of th	o organization	that are held and	administered for t	the	
3a	organization by:	possession or in	e organization	inal are nelu anu	administered for t	Ye	s No
	•					,	
	(7)					. 3a(i)	1
_	(-,					. 3a(ii)	
b	If "Yes" to 3a(ii), are the related organization					. 3b	
4	Describe in Part XIV the intended uses						
Part	Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.						
	Description of investment	(a) Cost or of	1 ' '	st or other basis (other)	c) Accumulated depreciation	(d) Book v	alue
1a	Land		75,000	†			75,000
Ь	Buildings	··· · · · · · · · · · · · · · · · · ·	750,940		0		750,940
c	Leasehold improvements						
ď	Equipment						
e	Other						
	Add lines 1a through 1e. (Column (d) m	ust equal Form 99	90. Part X. colui	nn (B), line 10(c).)			825,940

Part VII Investments—Other Securities.	See Form 990, Part X,	line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			· · · · · · · · · · · · · · · · · · ·
(A)	·		
(B)	- · · · · · · · · · · · · · · · · · · ·		
(C)			
(D) (E)			
(F)			
(G)	••		
(H)	-		
(1)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments - Program Related	I. See Form 990, Part X,	line 13.	
(a) Description of investment type	(b) Book value	(c) Method of vale Cost or end-of-year m	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX Other Assets. See Form 990, Pa	rt X, line 15.	· · · · · · · · · · · · · · · · · · ·	<u>-</u> -
) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(7)			
(8)			
(9)			
(10) Total. (Column (b) must equal Form 990, Part X, co	ol (B) line 15)		
Part X Other Liabilities. See Form 990,			
1. (a) Description of liability	(b) Amount		1.1.7.7.
(1) Federal income taxes		†	
(2)		1	,
(3)	,	1	
(4)]	;
(5)			,
(6)			
(7)]	
(8)			
(9)		_	
(10)		1	
(11)		1	,
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶		the executation's financial states	

Part	XI Reconciliation of Change in Net Assets from Form 990 to Au	dited Financial Statem	ents
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 through 8		9
10	Excess or (deficit) for the year per audited financial statements. Combine		10
Part	XII Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue 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	2a	
b	Donated services and use of facilities	2b	-
C	Recoveries of prior year grants	2c	<u> </u>
d	Other (Describe in Part XIV.)		1
е	Add lines 2a through 2d		1 2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)		7
C	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)	5
Part	Reconciliation of Expenses per Audited Financial Statem	ents With Expenses po	er Return
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	2a	<u> </u>
b	Prior year adjustments	2b	7
C	Other losses	2c	7 1
d	Other (Describe in Part XIV.)		1
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:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	7
C	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	18.)	5
Part			
Comp	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9	9; Part III, lines 1a and 4; F	Part IV, lines 1b and 2b;
	line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII,	lines 2d and 4b. Also com	plete this part to provide
-	ditional information.		
The in	ended use of the Endowment Fund is to lower tuition cost for all students by u	ising the investment income	e to offset operational
_	F.1		
costs	f the school.		
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			-

Schedule D (Fo	omh 990) 2010	
Part XIV	Supplemental Information (continued)	

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Schedule D (Form 990) 2010

SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Schools

► Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047
2010
Open to Public Inspection

Name of the organization

Part I

Racine Society For Christian Instruction

Employer identification number

39 0932603

			YES	NO
1	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?	1	1	
2	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, programs, and scholarships?	2	1	
3	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 describe. If "No," please explain. If you need more space, use Part II	3	-	
	Newspaper ads state that the school does not discriminate based on race.			
4 a b	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially	4a	1	
c	nondiscriminatory basis?	4b	1	
d	with student admissions, programs, and scholarships?	4c	1	
5 a	Does the organization discriminate by race in any way with respect to: Students' rights or privileges?	5a	-	
b	Admissions policies?	5b		1
С	Employment of faculty or administrative staff?	5c		✓
d	Scholarships or other financial assistance?	5d	ļ	1
e	Educational policies?	5e		✓
f	Use of facilities?	5f	ļ	1
g	Athletic programs?	5g	ļ	1
h	Other extracurricular activities?	5h		1
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a		
b	Has the organization's right to such aid ever been revoked or suspended?	6b		<u> </u>
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II. 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," explain on Part II.	7		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

Racine Society For Christian Instruction	39 0932603
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.	
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Part VI Section A Item 7a - The organization has voting members that elect one third of the Board Of D	irectors for a three year term at the
annual meeting.	
Part VI Section A Item 7b - The organization has voting members that approve the annual budget reco	mmended by the Board Of Directors
and also any items of business requiring membership vote at the annual meeting (e.g. Constitution Ar	mendment).
······	
Part VI Section B Item 11b - The form 990 is reviewed by the Treasurer and Finance Committee before	submittal, also upon request.
Part VI Section B Item 12c - As the new Board Of Directors is formed each year the Conflict Of Interes	t 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 Princip	oal. None of the Board Of Directors
receive any compensation. The compensation for the Principal is established by the Finance Committ	ee and approved by the Board Of
Directors. The Compensation Committee and Finance Committee use comparability data from Christic	an Schools International in establishing
employee salaries. The compensation of the Principal is well below the minimum IRS definition of salaries.	ary of key employees.
Part VI Section C Item 19 - The organizations governing documents, conflict of interest policy and final	nncial statements are available upon
request. A written notice to parents and organization members is given that the published financial st	atements are available upon request.
END	