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# Form 990

### Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2011 Open to Public

Department of the Treasury Internal Revenue Service

benefit trust or private foundation)

Inspection ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. July 1 For the 2011 calendar year, or tax year beginning , 2011, and ending , 20 12 D Employer identification number C Name of organization The Foundation for a Christian Civilization, Inc. Address change Doing Business As The American TFP, America Needs Fatima 23-7325778 Number and street (or P.O. box if mail is not delivered to street address) П Name change Room/suite E Telephone number  $\Box$ Initial return P.O. Box 787 785-584-1112 City or town, state or country, and ZIP + 4 Terminated Rossville, KS 66533-0787 Amended return G Gross receipts \$ Raymond E. Drake F Name and address of principal officer H(a) Is this a group return for affiliates? ☐ Yes ☑ No Application pending 1358 Jefferson Rd., Spring Grove, PA 17362 H(b) Are all affiliates included? Yes No If "No," attach a list (see instructions) √ 501(c)(3) 501(c) ( ) ◀ (insert no ) ☐ 4947(a)(1) or Tax-exempt status Website: ▶ tfp.org; anf.org; tfpstudenaction.org H(c) Group exemption number ▶ NY L Year of formation 1973 M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities: To further the values of Christian Civilization by defending the principles of tradition, family and property. To spread the message of Our Lady of Fatima Activities & Governance throughout America. For this end, the corporation organized over 7,515 Public Square Rosary Rallies for America in October, 2011. Check this box ► If the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . . 3 7 Number of independent voting members of the governing body (Part VI, line 1b) 4 2 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 75 Total number of volunteers (estimate if necessary) . . . . . 6 45 Total unrelated business revenue from Part VIII, column (C), line 12 0 7a Net unrelated business taxable income from Form 990-T, line 34 0 7b Current Year Contributions and grants (Part VIII, line 1h). 8,100,414 8,000,347 Program service revenue (Part VIII, line 2g) 9 35,015 50,969 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 10,643 9,817 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 311,281 379,721 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 8,457,353 8,440,854 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . . 13 389,788 391,155 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . . . 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1.613.488 1,764,202 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 213,406 217.725 Total fundraising expenses (Part IX, colump (D), line 25). h Other expenses (Part IX, column (A), lines 11a-11d) (11 F24e) \/ (-1). 17 5,790,242 5,694,914 18 Total expenses. Add lines 13-17 (must equal Part IX column (A), line 25 8,008,291 8,066,629 Revenue less expenses. Subtract line 18 from line 12 19 449.062 374 225 End of Year Beginning of Current Year 20 Total assets (Part X, line 16) 6,549,881 6,736,136 21 Total liabilities (Part X, line 26) . . 576,155 362,135 Net assets or fund balances. Subtract line 21 from line 20 22 5,973,726 6,374,001 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge ami Sign Signature of officer Here Denjemin Type or print name and title Date Print/Type preparer's name Paid Check [] If 11/7/12 P00441694 Kathryn Maresh self-employed **Preparer** Firm's name **Deloitte Tax LLP** Firm's EIN ▶ 86-1065772 **Use Only** Firm's address ▶ 1601 Dodge Street, Suite 3100, Omaha, NE 68102 Phone no 402-346-7788

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

For Paperwork Reduction Act Notice, see the separate instructions.

☐ Yes 🗸 No

Form **990** (2011)

Cat. No. 11282Y

Part	
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	This society is a civic, cultural and nonpartisan organization which, inspired by the traditional teachings of the Supreme Magisterium
	of the Roman Catholic Church, works in a legal and peaceful manner in the realm of ideas to defend and promote the principles
	of private ownership, family and perennial Christian values with their twofold function: individual and social.
2	Did the organization undertake any significant program services during the year which were not listed on the
2	
3	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program
•	
4	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of
	grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
	grante and anotations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 1,934,054 including grants of \$ 0 ) (Revenue \$ 279,223 )
40	Direct Mail Campaigns – America Needs Fatima was the Foundation's main direct mail campaign this year. Its goal is to spread the
	Fatima message of prayer and conversion throughout America. This year, an estimated total of 1.5 million letters were sent to current
	America Needs Fatima campaign members in a total of 12 mailings. As part of the direct mail outreach, over one hundred thousand
	of each of the following items were distributed during the year: devotional Fatima calendars, books about Blessed Francisco Marto,
	rosaries, Miraculous Medals, St. Benedict Medals, Sacred Heart photos and audio CDs with meditations on the Way of the Cross.
	Approximately 6,000 people agreed to consecrate themselves to the Immaculate Heart of Mary after receiving a letter encouraging
	them to do so. Three copies of the flyer titled St. Michael the Archangel and the Pro-Life Victory were sent to thousands of local
	activists around the country. Crusade magazine is also mailed six times a year to approximately 110,000 people. America Needs
	Fatima also distributed 1.6 million pictures of Our Lady of Fatima as part of its effort to enthrone Mary in Every Home.
	atima also distributed 1.0 million pictures of our Lady of Fatima as part of its enort to entirione mary in Every Home.
4b	(Code: ) (Expenses \$ 1,251,738 including grants of \$ 14,424 ) (Revenue \$ 65,416 )
	Publications – The Foundation continued publishing its bi-monthly magazine, Crusade, which is sent to an average of 110,000
	people. The Foundation did another printing of the book An American Knight: The Life Colonel John W. Ripley, USMC. A total of
	18,726 books related to the furtherance of the values of Christian civilization were distributed during the fiscal year. The statement:
	"Who Do the Occupy Fort Benning Protestors Represent? – Unmasking the 0.99%"was published in the Ledger Inquirer in
	Columbus, Georgia. Also, a position paper was published in the Washington Times. The Foundation continued to maintain three
	websites: the TFP site, tfp.org, the America Needs Fatima site, anf.org, and the TFP student action website,
	tfpstudentaction.org. Several blogs also publish content produced by the Foundation. These sites and blogs received more than
	100,000 unique visitors each month. Generally one article or position paper is published each week on the TFP site. The two other
	sites publish information about the activities of each campaign.
4c	(Code: ) (Expenses \$ 811,721 including grants of \$ 16,786 ) (Revenue \$ 190,520 )
	Dissemination of Ideas – Personal contact with interested individuals and organizations continues to be an important way of
	furthering the values of Christian civilization. This personal contact continues to be done throughout the United States. The FCC
	operates five offices for this purpose: in Spring Grove, PA, McLean, VA; Park Ridge, IL; Orange, CA; and Honolulu, HI. The
	Foundation also distributed hundreds of thousands of religious articles, including statues, rosaries, crucifixes, Miraculous Medals,
	Consecration cards, First Saturday pledges, and devotional audio CD's. FCC representatives gave 2,180 presentations on the
	message of Our Lady at Fatima in homes, schools, and nursing homes. An estimated 25,000 people attended a Fatima presentation
	last year.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 2,444,093 including grants of \$ 345,790 ) (Revenue \$ 50,350 )
4e	Total program service expenses ► 6,441,605

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Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
	complete Schedule A	1	✓_	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2_		✓_
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	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 for which 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		<b>✓</b>
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	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 temporarily restricted endowments, permanent endowments, 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>✓</b>	
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
	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	1	
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 11f	✓	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	✓	
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>✓</b>
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<del>                                     </del>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? 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		<b>/</b>
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<b>✓</b>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
		For	n 990	(2011)

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<b>√</b>	
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		<b>✓</b>
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		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		<b>√</b>
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		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		<b>√</b>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b	<b>√</b>	
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 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
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	✓	
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		<b>√</b>
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		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		<b>✓</b>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	✓	

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			. $\Box$
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 51			
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		<u> </u>	
	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 75			<u> </u>
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
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.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	i	<b>✓</b>
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			Γ,
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		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	L	✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization 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	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	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			<u> </u>
	organization, have excess business holdings at any time during the year?	8	<u> </u>	<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	L	<u>L.</u> _
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	1		
11	Section 501(c)(12) organizations. Enter:			İ
a	Gross income from members or shareholders			
þ	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		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	Į		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	ļ		<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u></u>
_	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans	]		
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

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Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
<del></del>	Check if Schedule O contains a response to any question in this Part VI	<u> </u>	<u> </u>	. ✓
Secti	on A. Governing Body and Management		V	
4	Enter the number of victing members of the revenues hadrest the and of the toy vices.		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7  If there are material differences in voting rights among members of the governing body, or	`	,	1
	if the governing body delegated broad authority to an executive committee or similar		`	
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 2		,	۷.
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1 .		
	any other officer, director, trustee, or key employee?	2	<b>✓</b>	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		✓_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6	Did the organization have members or stockholders?	6 -	<b>✓</b>	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	_		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a	✓	
D	stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	70		
	the year by the following:	A	Š.,,	<b>1</b>
а	The governing body?	8a	<b>✓</b>	
b	Each committee with authority to act on behalf of the governing body?	8b	<b>√</b>	
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		✓
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		<b>✓</b>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<b>✓</b>	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	ı ıa	<b>∨</b> ⊱	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	•	<b>√</b>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	✓	
13	Did the organization have a written whistleblower policy?	13	✓	
14	Did the organization have a written document retention and destruction policy?	14	<b>√</b>	<del></del>
15	Did the process for determining compensation of the following persons include a review and approval by	م <b>آ</b> نوشتنگ د	جند	-
_	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		<u> </u>	
a b	The organization's CEO, Executive Director, or top management official	15a 15b		<b>√</b>
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130		<b>V</b>
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		<b>✓</b>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			1
	organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed See Schedule O for the list of state:			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	1 501(	၁)(၁)s	only)
19	Own website  Another's website  Upon request  Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o	f inter	aet n	olicy
	and financial statements available to the public during the tax year.	ı ıııter	car h	oncy,
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	:	
	organization: ► Catherine E. Slobodnik, 426 Main St., Rossville, KS 66533 (785) 584-1112			

_		7
Pag	е	•

Earm	റററ	(2011)	

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

Check if Schedule O contains a response to any question in this Part VII . . .

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 employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization no	r any relate	d org	aniz	atic	n c	ompe	nsa	ted any currer	t officer, director	r, or trustee.	
(A) Name and Title	(B)  Average hours per week	officer and a director/trustee)					n an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) Raymond E. Drake, President and Director	50	<b>√</b>		1				0	0		0
(2) John W. Horvat, Vice-President and Director	50	<b>√</b>		1				0	0		0
(3) Luiz A. Fragellı, Director	40	1					_	54,000	0		0
(4) Gary J. Isbell, Director	40	<b>▼</b>						36,290	0		0
(5) C. Preston Noell, III, Director	40	1						o	0		0
(6) Robert E. Ritchie, Director	50	1						30,940	0		0
(7) Antonio Fragelli, Director	50	<b>√</b>						33,875	0		0
(8) Benjamin A. Hiegert, Secretary-Treasurer	40			1				39,000	o		0
(9)						·					_
(10)											_
(11)											_
(12)											_
(13)					-						_
(14)		_					-				_

Part	Section A. Officers, Directors, Trust  (A)  Name and title	(B) Average	(do n	ot ch	Pos eck s pe	c) ition more	than o	one n an	(D) Reportable	(E) Reportabl	le	(F) Estimated	
	•	hours per week (describe hours for related organizations in Schedule O)	Individua or directo	Institutional trustee	a Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation related organizatio (W-2/1099-M	ns	amount of other compensation from the organization and related organizations	1
(15)													
(16)												· <u>-</u>	
(17)													
(18)								-					
(19)												<u>-</u>	
(20)													
(21)								-					
(22)						_		_					
(23)				_									
(24)										-			
(25)						_							
1b	Sub-total								194,105		0		0
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Sectio	n A					<b>&gt;</b>	0 194,105		0		0
2	Total number of individuals (including but reportable compensation from the organi			ose	list	ted :	above	e) w	ho received m	ore than \$10	00,000	of	
3	Did the organization list any former of employee on line 1a? If "Yes," complete to	ficer, direc	tor, c					emp	oloyee, or high	est compe	nsated	Yes	No /
4	For any individual listed on line 1a, is the organization and related organizations individual											राज के <u>किं</u> क्षेत्रक	200 mg
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or ind			<u>,</u>
	on B. Independent Contractors	· · · · · · · · · · · · · · · · · · ·	•						· · · · · · · · · · · · · · · · · · ·		-		<u> </u>
1	Complete this table for your five highest compensation from the organization. Repyear.												ıx
	(A) Name and business add	ress							(B) Description of s	ervices		(C) Compensation	
	Worldwide, LLC, 36 Cordage Park Cir., Ste. 2 Care Center, Inc., 480 West Tuscarawas Ave					4420	13		ndraising consu emarketing func			<del></del>	0,751 4,945
2	Total number of independent contractor received more than \$100,000 of compens							) th	ose listed abo	ove) who			

Par	VIII	Statement of Revenue	-				
à :		•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns 1a	0				
irar our	b	Membership dues 1b	0				,
S, G	С	Fundraising events 1c	0				
sift. ar /	d	Related organizations 1d	0				
is, C	е	Government grants (contributions) 1e	0				
tion S r	f	All other contributions, gifts, grants,		%	~		
ib g		and similar amounts not included above 1f	8,000,347				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f \$	0				
	h	Total. Add lines 1a-1f	▶	8,000,347			
Program Service Revenue			Business Code				***
Ş.	2a	Sales of Prints and Calendars	511190	619	619	0	0
ž	b	Seminar & Camp Registration Fees	900099	50,350	50,350	0	0
_ ج	С			0	0	0	_ 0
Ser	d			0	0	0	0
Ë	e			0	0	0	0
g B	f	All other program service revenue.		0	0	0	0
	g	Total. Add lines 2a–2f		50,969			<u> </u>
	3	Investment income (including dividend other similar amounts)					
		•		8,556	0	0	8,556
	4	Income from investment of tax-exempt to	_	0	0	0	0
	5	Royalties	(ii) Personal	0	0	0	0
	6-		<del>- </del>		. A AŞ	4.	
	6a		0 0		*	7	<b>A</b> '-
	b	Rental income or (loss) 5	-	<b>3</b>		<u>.</u>	
	d	Not worth in a sure on (1000)		50	<u> </u>		50
	7a	Gross amount from sales of (i) Securities	(ii) Other				30
	-		0 4,644				``^ ***;
	b	Less: cost or other basis					,
	j	and sales expenses .	3,383		> <sub>4</sub>		* :
	С	Gain or (loss)	1,262				
	d	NI - A (I )	▶	1,262	0	0	1,262
Other Revenue	8a		a 0				ý
Ö	"	Less: direct expenses	0 0			0	
	с 9а	Gross income from gaming activities.	CVEING .				
	"	0 0 10/11 40	اه				
	ь						
		Net income or (loss) from gaming ac		0	0	0	0
	10a	Gross sales of inventory, less returns and allowances	255,454				
	Ь	3	(155,716)				
	<u> </u>	Net income or (loss) from sales of inv	<del></del>	99,738	99,738	0	0
		Miscellaneous Revenue	Business Code				
	11a	Rent Mail List to 501c3 org.	532000	279,223	0	0	279,223
	b	Credit Card Rewards	900099	500	0	0	500
	C	Insurance Proceeds	900099	106	0	0	106
	d	All other revenue	900099	105	0	0	105
	e 10	Total Add lines 11a-11d	🟲	279,934			
	12	Total revenue. See instructions	▶	8,440,854	150,706	0	289,801

### 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).

requir	ed to complete columns (B), (C), and (D).		<del> </del>		<u></u> .
	Check if Schedule O contains a respons				
	of include amounts reported on lines 6b, 7b, o, 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 United States. See Part IV, line 21	193,288	193,288		
2	Grants and other assistance to individuals in				_
	the United States. See Part IV, line 22	6,890	6,890		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	189,610	189,610		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
	trustees, and key employees	163,447	133,520	13,422	16,505
6	Compensation not included above, to disqualified			19,122	
•	persons (as defined under section 4958(f)(1)) and		-		-
	persons described in section 4958(c)(3)(B)	195,005	159,111	16,088	19,806
7	Other salaries and wages	1,248,195	1,019,079	102,613	126,503
8	Pension plan accruals and contributions (include	1,240,100	1,010,070	102,010	120,303
	section 401(k) and 403(b) employer contributions)	o	o	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	157,555	128,519	13,000	16,037
11	Fees for services (non-employees):	137,333	120,313	13,000	10,037
	Management	0	o	٥	0
a	Legal	8,958	6,447	2,512	0
b	Accounting	39,105	0,447	39,105	0
C	<u> </u>	39,109	0	39,105	0
d	Lobbying	217,725	U		<u></u>
e 4	Professional fundraising services. See Part IV, line 17	217,725	0	0	217,725
f	Investment management fees				0
g	Other	24,941 6,748	22,203	1,264	1,474
12	Advertising and promotion		6,698		51
13	Office expenses	232,700	196,732	10,200	25,768
14	Information technology	108,207	96,284	2,754	9,169
15	Royalties	0 481.717	0	0	0 20 200
16	Occupancy		426,943	26,413	28,360
17 18	Travel	589,206	552,764	14,030	22,413
10	Payments of travel or entertainment expenses for any federal, state, or local public officials				
40	• • • • • • • • • • • • • • • • • • • •	0	0	0	0
19	Conferences, conventions, and meetings .	79,616	79,616	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	264,310	228,859	11,749	23,701
23	Insurance	50,758	24,015	24,954	1,789
24	Other expenses. Itemize expenses not covered				Į.
	above. (List miscellaneous expenses in line 24e. If				İ
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	Printing Expenses	1,199,287	1,014,313	881	184,093
b	Postage and Shipping	1,323,554	935,059	10,212	378,283
C	Mass Mailing Services	687,803	604,919	0	82,883
d	Consumables	204,729	180,147	11,670	12,911
е	All other expenses	393,275	236,589	24,541	132,145
25	Total functional expenses. Add lines 1 through 24e	8,066,629	6,441,605	325,407	1,299,616
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here following SOP 98-2 (ASC 958-720) if	2,579,677	2,318,902	0	260,774

Part X **Balance Sheet** (A) (B) Beginning of year End of year 150,366 392,107 1 1 2 2 Savings and temporary cash investments . . . . . . . . . 2,182,196 2,250,647 3 3 0 0 17,925 4 4 9,191 Receivables from current and former officers, directors, trustees, key 5 employees, and highest compensated employees. Complete Part II of ol 5 n Receivables from other disqualified persons (as defined under section 6 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) . . . . . 0 6 0 Assets 7 0 7 0 8 480,253 8 490,678 Prepaid expenses and deferred charges . \_ . \_ 9 333,404 9 243,666 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 3,218,132 Less: accumulated depreciation . . . . 10b (1.407.326)1,831,335 10c 1.810.806 11 Investments—publicly traded securities . . . . . . . . . . . . . . . 0 11 0 12 Investments—other securities. See Part IV, line 11 . . . . . . . . 0 12 0 13 0 Investments—program-related. See Part IV, line 11 . . . . . . . o 13 14 ol 14 0 15 1,554,402 15 1,539,041 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . 6,549,881 16 6,736,136 17 545,490 17. 327,956 Accounts payable and accrued expenses . . . . . . . . . . 18 18 0 0 19 0 19 0 20 ol 20 0 21 0 Escrow or custodial account liability. Complete Part IV of Schedule D . 21 0 Payables to current and former officers, directors, trustees, key 22 Liabilities employees, highest compensated employees, and disqualified persons. 0 22 0 23 Secured mortgages and notes payable to unrelated third parties . . . 0 23 0 24 Unsecured notes and loans payable to unrelated third parties . . . ol 24 0 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 30,665 34,179 25 26 Total liabilities. Add lines 17 through 25 . . . . 576,155 26 362.135 Organizations that follow SFAS 117, check here ▶ ✓ and complete . .. **Net Assets or Fund Balances** lines 27 through 29, and lines 33 and 34. 27 18,407,479 27 22,320,837 28 (12,434,201) 28 (15,946,836) 29 29 O Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . . . . . . . . . 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 Retained earnings, endowment, accumulated income, or other funds. 32 Total net assets or fund balances . . . . . . . . . . . . . . . . . . 33 5,973,726 33 6,374,001 34 Total liabilities and net assets/fund balances . . . . . . . . . . . 6,549,881 34 6,736,136

Part	Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		<u> </u>		<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1			0,854
2	Total expenses (must equal Part IX, column (A), line 25)	2		(8,066	<u> </u>
3	Revenue less expenses. Subtract line 2 from line 1	3		37	4,225
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		5,97	3,726
5	Other changes in net assets or fund balances (explain in Schedule O)	5		2	6,050
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		6,37	4,001
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other		_   3.3	1	<u> </u>
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olaın	n :	¥	
	Schedule O.				2
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a	✓	
b	Were the organization's financial statements audited by an independent accountant?		. 2b	<b>✓</b>	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov				
	of the audit, review, or compilation of its financial statements and selection of an independent accou	ntant1	? 2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, ex	olain i	in 🗔	A. i	
	Schedule O.		'*	7.7	JW !
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year	ar wer	e .		
	issued on a separate basis, consolidated basis, or both:				7
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			. "	* 1
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	n		
	the Single Audit Act and OMB Circular A-133?		. За		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo th	e		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such at	udits	3b		
			For	m <b>990</b>	(2011)

### **SCHEDULE A** (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

OMB No 1545-0047 2011

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

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection Employer identification number

The	Fou	ndation for a Ch	nristıan Civilizatio	n, Inc.						23-732	5778		
Pa	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.												
The	orga	anization is not	a private founda	ition because it is: (Fo	r lines 1 t	through 1	1, check	only one	e box.)				
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2		A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E.)											
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:											
_ 5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)											
6		A federal, state	e, or local gover	nment or government	al unit de	scribed in	section	170(b)(1	1)(A)(v).				
<b>7</b>	<u> </u>			receives a substantia (A)(vi). (Complete Par		its suppo	ort from a	a governi	mental ur	nit or from	the ge	neral	public
8		A community	trust described i	n section 170(b)(1)(A)	<b>)(vi).</b> (Cor	nplete Pa	art II.)						
9		An organization	on that normally	receives: (1) more that	an 33¹/₃%	of its su	upport fro	om contr	ibutions.	memberst	nip fees	s. and	aross
				d to its exempt funct									
		- •	-	ent income and unrel				•		n 511 tax	) from	busin	esses
		acquired by th	ne organization a	fter June 30, 1975. Se	ee <b>sectio</b>	n 509(a)(	<b>2).</b> (Com	plete Par	t III.)				
10		An organizatio	n organized and	l operated exclusively	to test for	or public s	safety. Se	e <b>sectio</b>	n 509(a)(	(4).			
11				nd operated exclusive									
				licly supported organ								3ee <b>s∈</b>	ection
_				describes the type of						<u>-</u>			
		a ☐ Type I				III-Funct		~		d □			
•	; <u> </u>			that the organization									
				ers and other than one	e or more	publicly	support	ed organ	izations o	described	in sect	on 50	9(a)(1)
		or section 509						_					
1				a written determination	on from 1	the IRS 1	that it is	a Type	i, type	II, or Type	e III su	pporti	ng
	_	-	check this box .	· · · · · · · · ·									· ⊔
9	3	following pers	ons?	he organization accer	-								
				ndirectly controls, eith							d	Yes	No
				ody of the supported o	-						11g(	i)	<u> </u>
			•	on described in (i) abo							11g(i	i)	<u> </u>
				a person described in							11g(:	i)	<u> </u>
			·	on about the supporte									
(i		ne of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1-9		rganization sted in your		ou notify nization in		is the tion in col		Amount apport	of
	σ.	9==4.1.4.1		above or IRC section		document?	col (i)	of your	(i) organi	zed in the		арроп	
				(see instructions))	Yes	No	Yes	No No	Yes	No			
					162	NO	162	NO	Tes	NO			
(A)					İ			}					
									<u> </u>	<del>  </del>			
(B)								}					
				<u>'</u>					<del> </del>	<del>                                     </del>			
(C)													
יטי									-				
(D)					_								
(E)													
_											•		

Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	7,194,660	6,900,636	7,026,371	8,100,414	8,000,347	37,222,429
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4	Total. Add lines 1 through 3	7,194,660	6,900,636	7,026,371	8,100,414	8,000,347	37,222,429
5	The portion of total contributions by each person (other than a governmental unit or publicly					Section 1991	
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	**				*	0
6	Public support. Subtract line 5 from line 4.	*					37,222,429
	on B. Total Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	7,194,660	6,900,636	7,026,371	8,100,414	8,000,347	37,222,429
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	56,523	20,965	13,411	10,703	8,606	110,208
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	o	0	0	0	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	o	0	0	0	0
11	Total support. Add lines 7 through 10						37,332,637
12	Gross receipts from related activities, etc	. (see instruction	ons)			12	1,783,463
13	First five years. If the Form 990 is for the organization, check this box and stop he	re				ear as a sectio	, ,, ,
	on C. Computation of Public Suppor						<del> </del>
14	Public support percentage for 2011 (line 6					14	99.70 %
15 16a	Public support percentage from 2010 Sch 331/3% support test—2011. If the organization					15	97.01 %
	box and stop here. The organization qua 331/3% support test—2010. If the organ	lifies as a publi	cly supported	organization			. 🕨 🗸
b	check this box and stop here. The organ	zation qualifies	s as a publicly	supported org	anization .		. ▶ 🗆
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part IV how the organization meets the "forganization	ets the "facts-a acts-and-circu	and-circumstai	nces" test, che t. The organiza	eck this box an ation qualifies	d <b>stop here.</b> E	xplain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization means and in Part IV how the organization means apported organization in the organization of the organizati	tion meets the leets the "facts	"facts-and-cil -and-circumst	rcumstances" ances" test. T	test, check the organization	is box and <b>st</b> en qualifies as a	op here. a publicly .
18	<b>Private foundation.</b> If the organization di instructions						see . ► □

### 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.)

	in the organization rails to quality	under the te	Sta listed Deit	Jw, piease cc	inplete rait	<u>''',                                    </u>	
	on A. Public Support	1 ( ) 0007	# 1 0000	( ) 0000	4.0.040	(1) 0044	(0 T. ) . I
	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	<b>(d)</b> 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		<u> </u>				
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	İ				<u> </u>	
	to or expended on its behalf						
5	The value of services or facilities						
J	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						<del></del>
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .			:			
b	Amounts included on lines 2 and 3				,		_
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b			Ye 300.80			
8	Public support (Subtract line 7c from					or our settlement of the second	
C4:	line 6.)	1 - 4 - 7 - 7 - 7	3 3 98 4 4 4	र्था रेचा है आहे. आहें रहला ह	77.388	· · · · · · · · · · · · · · · · · · ·	<del></del>
	on B. Total Support	(-) 0007	(h) 0000	(=) 0000	(-1) 0040	(-) 0011	(6) T-4-1
	dar year (or fiscal year beginning in)  Amounts from line 6	(a) 2007	<b>(b)</b> 2008	(c) 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	(f) Total
9 10a	Gross income from interest, dividends,		-				
iva	payments received on securities loans, rents,			•		•	
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
-	section 511 taxes) from businesses		1				
	acquired after June 30, 1975						
С	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						
40	(Explain in Part IV.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop he	-				ear as a section	
Secti	on C. Computation of Public Suppo						
15	Public support percentage for 2011 (line						%
16	Public support percentage from 2010 Sc			<u> </u>		16	<u>%</u>
	on D. Computation of Investment In						
17	Investment income percentage for 2011	•		₹			<u>%</u>
18	Investment income percentage from 2010						<u>%</u>
19a	331/3% support tests—2011. If the organ						
	17 is not more than 33½%, check this box		-	-		=	_
b	331/3% support tests—2010. If the organization 18 is not more than 331/3%, check this						
20	Private foundation. If the organization d	=	_	-			_
20	Titale loundation. If the organization to	id flot check a	DOX OF HIRE 14	, 13a, Ul 13D, C	PUSCE THE DOX	and 355 111311 UC	uona 🕨 📙

Page	4

	Form 990 or 990-EZ) 2011	Page
Part IV	<b>Supplemental Information.</b> 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).	
	•	
•		
	······································	
		<b></b>
		<b></b>

#### **SCHEDULE C** (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

OMB No 1545-0047 2011

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public Inspection

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below Do not complete Part I-B.

• Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C.

· Section 527 organizations: Complete Part I-A only. If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A Do not complete Part II-B • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then • Section 501(c)(4), (5), or (6) organizations. Complete Part III Name of organization Employer identification number The Foundation for a Christian Civilization, Inc. 23-7325778 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 3 Volunteer hours . . . Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 . . . . 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955. 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . Yes No No **b** If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function 2 Enter the amount of the filing organization's funds contributed to other organizations for section 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL. 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received and funds If none, enter -0promptly and directly delivered to a separate political organization If none, enter -0-(1) (2) (3)(4)(5) (6)

Pa	t II-A Complete if the organization section 501(h)).	n is exempt under section 501(c)(3) and filed	d Form 5768 (ele	ection under
A		ongs to an affiliated group (and list in Part IV		oup member's
_	•	ses, and share of excess lobbying expenditur	•	
<u>B</u>		ecked box A and "limited control" provisions a	· · · · · · · · · · · · · · · · · · ·	
		ying Expenditures	(a) Filing organization's totals	(b) Affiliated group totals
		eans amounts paid or incurred.)		group totals
1	, 3	· · · · · · · · · · · · · · · · · · ·	3,274	0
	Total lobbying expenditures to influence	• • • • • • • • • • • • • • • • • • • •	0	0
		ı and 1b)	3,274	0
	d Other exempt purpose expenditures .		7,968,397	0
	<ul> <li>Total exempt purpose expenditures (add</li> </ul>	lines 1c and 1d)	7,971,672	0
	<ul> <li>Lobbying nontaxable amount. Enter t columns.</li> </ul>	he amount from the following table in both	548,584	548,584
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		XX 44,
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	and the same	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	THE STREET STREET	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25	% of line 1f)	137,146	0
	Subtract line 1g from line 1a. If zero or le	ss, enter -0	0	0
i	Subtract line 1f from line 1c. If zero or les	s, enter -0	0	0
•	If there is an amount other than zero reporting section 4911 tax for this year?	on either line 1h or line 1i, did the organization	file Form 4720	Yes No
	4-Ye	ar Averaging Period Under Section 501(h)		

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	( <b>d)</b> 2011	(e) Total			
2a	Lobbying nontaxable amount	471,050	505,099	546,364	548,584	2,071,097			
b	Lobbying ceiling amount (150% of line 2a, column (e))	The state of the s				3,106,645			
С	Total lobbying expenditures	589	10,610	2,101	3,274	16,574			
d	Grassroots nontaxable amount	117,763	126,275	136,591	137,146	517,775			
е	Grassroots ceiling amount (150% of line 2d, column (e))			Kilon n		776,662			
f	Grassroots lobbying expenditures	0	9,976	ľ	3,274	13,478			

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Schedule C (Form 990 or 990-EZ) 2011

Part	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	iled	Form	5768		
For o	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(6	a)		(b)	
	lobbying activity.	Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	,	2 (A) 2 A	**************************************		/
а	Volunteers?					. ~ ~
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			<u> </u>	, S	
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
— <u>!</u> =	_Other_activities?					
j	Total. Add lines 1c through 1i	West.	7.78 <b>6</b> 7.7			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		66			· ·
b	If "Yes," enter the amount of any tax incurred under section 4912			-		
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .  If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				- 56.	, ,
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5)		ction		*
r ai t	501(c)(6).	(5), (	JI 36	CHOIT		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	<u> </u>	<u> </u>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2.		-
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? .  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			3	<u> </u>	
1	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Of answered "Yes."  Dues, assessments and similar amounts from members				ine 3	3, is
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b			
С	Total	•	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	•	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year?	ıng	4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Pari		•	<b>J</b>			
Comp	lete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; b, complete this part for any additional information.	Part II	-A; ar	nd Part	II-B,	line

	rm 990 or 990-EZ) 2011	Page 4
Part IV	Supplemental Information (continued)	
	······································	
	······································	
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### SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

OMB No 1545-0047

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

mployer identification number

	are fragmentation		ampleyer identification flamber
The Fo	undation for a Christian Civilization, Inc.		23-7325778
Parl	Organizations Maintaining Dono	r Advised Funds or Other Similar Fu	inds or Accounts. Complete if the
	organization answered "Yes" to Fo	orm 990, Part IV, line 6.	•
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		<del></del>
2	Aggregate contributions to (during year) .		
	Aggregate grants from (during year)		
	Aggregate value at end of year		
5	Did the organization inform all donors and	donor advisors in writing that the assets	held in donor advised
	funds are the organization's property, subject		
	Did the organization inform all grantees, dor	_	
•	only for charitable purposes and not for the		
	conferring impermissible private benefit? .		· · · · · · · · · · · · · · · · No
Part	Conservation Fasements Comm	lete if the organization answered "Yes	" to Form 990 Part IV line 7
1	Purpose(s) of conservation easements held to		to 1 offi 330, 1 art 14, line 7.
•		recreation or education) Preservation	of an historically important land area
	Protection of natural habitat		of a certified historic structure
	Preservation of open space	Freservation	of a certified historic structure
2	Complete lines 2a through 2d if the organiza	tion held a gualified conservation contribut	tion in the form of a conservation
_	easement on the last day of the tax year.	tion held a qualified conservation contribu	don'n the form of a conservation
	cascificition the last day of the tax year.		Held at the End of the Tax Year
_	Total number of companyation accompany		
	<del>_</del>		
	Total acreage restricted by conservation eas		
	Number of conservation easements on a cer	• • • • • • • • • • • • • • • • • • • •	
d	Number of conservation easements includ		
•	historic structure listed in the National Regis		
	Number of conservation easements modified	d, transferred, released, extinguished, or te	erminated by the organization during the
	tax year ►		
	Number of states where property subject to		
5	Does the organization have a written poli		·
	violations, and enforcement of the conservat		
6	Staff and volunteer hours devoted to monito	ring, inspecting, and enforcing conservation	on easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation ea	sements during the year
	<b>\$</b>		
8	Does each conservation easement reported		of section 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?		· · · · · · · 🗌 Yes 🗌 No
9	In Part XIV, describe how the organization re		
	balance sheet, and include, if applicable, the	<del>_</del>	inancial statements that describes the
	organization's accounting for conservation e		
Part		ctions of Art, Historical Treasures, o	
	Complete if the organization answ	ered "Yes" to Form 990, Part IV, line 8	
	If the organization elected, as permitted und	• • • •	
	works of art, historical treasures, or other		
	public service, provide, in Part XIV, the text of	of the footnote to its financial statements the	nat describes these items.
b	If the organization elected, as permitted ur	nder SFAS 116 (ASC 958), to report in its	s revenue statement and balance sheet
	works of art, historical treasures, or other	similar assets held for public exhibition, of	education, or research in furtherance of
	public service, provide the following amounts	s relating to these items:	
	(i) Revenues included in Form 990, Part VIII,	line 1	<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works	of art, historical treasures, or other simil	ar assets for financial dain provide the
_	following amounts required to be reported up		
а	Revenues included in Form 990, Part VIII, lin		
b	Assets included in Form 990, Part X	<del>.</del>	<b>.</b>
	7,000,0 included in Form 330, Falt A		3

Cat No 52283D

Schedule D (Form 990) 2011

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part	Organizations Maintaining	Collections of	i Art, His	torical 1	reasures	, or Ot	ther Similar A	Assets (continued)
3	Using the organization's acquisition, collection items (check all that apply):		ther reco	rds, chec	k any of th	e follov	wing that are a	significant use of its
а	☐ Public exhibition		d	□ Loan	or exchang	ie prod	rams	
b	☐ Scholarly research							
	Preservation for future generations	•	·		<b>'</b>			
C					ha 6	<b>4</b> 1		:- D
4	Provide a description of the organization XIV.	tion's collections	and expi	ain now t	ney turther	the org	ganization's ext	empt purpose in Part
5	During the year, did the organization	solicit or receive	donation	s of art,	historical ti	reasure	s, or other sim	ilar
	assets to be sold to raise funds rather							
Par	IV Escrow and Custodial Arra							
	line 9, or reported an amoun	nt on Form 990,	Part X, I	ne 21.				
1a	Is the organization an agent, trustee included on Form 990, Part X?							not ·       Yes     No
b	If "Yes," explain the arrangement in Pa	art XIV and comp	lete the fo	ollowing t	able:		<del></del>	Amount
_	Reginning balance					-1.0	.	
	Beginning balance	===-	-: <del>- ·</del>	· <u> </u>		- ⊢	_	
						10		
e	Distributions during the year					16		
f	Ending balance							
2a	Did the organization include an amoun		Part X, line	21? .				. 🗌 Yes 🗌 No
	If "Yes," explain the arrangement in Pa							
Par	Endowment Funds. Comple		ization ar	nswered				
		(a) Current year	(b) Pn	or year	(c) Two year	rs back	(d) Three years ba	ack (e) Four years back
1a	Beginning of year balance							s manda a
b	Contributions							- 1
С	Net investment earnings, gains, and							8.24 <u>5</u> 8 5
	losses	- ~	-					
d	Grants or scholarships		1		<u> </u>			48 18 18
e	Other expenditures for facilities and							With the state of the state of
Ū	programs				]			1 × 30 4 × 7 × 640
f	Administrative expenses						-	KIN WAS WAS IN
g	End of year balance							\x
2	Provide the estimated percentage of t	he current vear e	nd balanc	e (line 10	column (a	)) held	as <sup>.</sup>	
a	Board designated or quasi-endowmer			/ (/o	,,	,,, ,,	<b></b>	
b	Permanent endowment		/0					
		%						
С	Temporarily restricted endowment ▶	%	000/					
•	The percentages in lines 2a, 2b, and 2							
3a	Are there endowment funds not in the	e possession of t	ine organi	zation tha	at are neld	and ad	ministered for	
	organization by:							Yes No
	(i) unrelated organizations							. 3a(i)
	(ii) related organizations							. 3a(ii)
b	If "Yes" to 3a(ii), are the related organi	zations listed as	required of	on Sched	ule R? .			. 3b
4	Describe in Part XIV the intended uses	s of the organizat	ion's end	owment f	unds.			
Part	VI Land, Buildings, and Equip	ment. See For	m 990, P	art X, lin	e 10.		<del></del>	
	Description of property	(a) Cost or o			or other basis ther)		Accumulated epreciation	(d) Book value
1a	Land		0	i	437,988		•	437,988
b	Buildings	_	0		1,244,544		519,906	724,638
c	Leasehold improvements				0		010,000	0
ď	Equipment		0	<del></del>	1,526,600		887,420	639,180
e	Other		0		9,000		007,420	9,000
	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	990, Part	X, column		)(c).)	•	1,810,806
	3 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		,					,

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 val Cost or end-of-year m	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			<del></del>
(G)		<u> </u>	
(H)			<del></del>
(1)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ►	d Coo Form 000 Dort V	lpo 12	
Part VIII Investments—Program Relate	1		
(a) Description of investment type	(b) Book value	(c) Method of val Cost or end-of-year m	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			<del></del>
(7)			
(8)			<del></del>
(10)			···· · · · · · · · · · · · · · · · · ·
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. See Form 990, Pa	art X, line 15.		
	a) Description		(b) Book value
(1) Decorational Works of Art			47,066
(2) Land Improvements (less depreciation)			155,409
(3) Building Improvements (less depreciation)			944,893
(4) Asbestos Removal from Buildings			7,314
(5) Advances to Employees and Volunteers			3,487
(6) Investment in Precious Metals at Market Value			380,871
(7)			
(8)			••
(9)			
(10)	al (D) line 15 \		
Total. (Column (b) must equal Form 990, Part X, c  Part X Other Liabilities. See Form 990,		· · · · · · · · · · · · · · · · · · ·	1,539,041
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes	0		
(2) Asbestos Removal from Buildings	31,658		
(3) Sales Tax Owed	2,521		
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			,
(10)			•
(11)			1
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25 ) ▶	34,179		
2. FIN 48 (ASC 740) Footnote. In Part XIV, provide		the organization's financial staten	nents that reports the
organization's liability for uncertain tax positions u	inder FIN 48 (ASC 740).		

-	e D (1 01111 930) 2011				
Part	XI Reconciliation of Change in Net Assets from Form 990 to A	udite	d Financial Statem	ents	3
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1_	8,440,854
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	8,066,629
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3	374,225
4	Net unrealized gains (losses) on investments		[	4	26,050
5	Donated services and use of facilities			5	0
6	Investment expenses		<u>-</u>	6	0
7	Prior period adjustments			7_	0
8	Other (Describe in Part XIV.)			8	0
9	Total adjustments (net). Add lines 4 through 8			9	26,050
10	Excess or (deficit) for the year per audited financial statements. Combine			10	400,275
Part	· · · · · · · · · · · · · · · · · · ·		<del></del>	Ret	· ·
1	Total revenue, gains, and other support per audited financial statements			1	8,622,620
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1	1	1	
а	Net unrealized gains on investments	2a	26,050	- 250	
b	Donated services and use of facilities	2b	0		
с	Recoveries of prior year grants	- <u>-2c</u> -	0	(3.600)	
d	Other (Describe in Part XIV.)	2d	0	<u> </u>	4.54
e	Add lines 2a through 2d			26	<u> </u>
3	Subtract line 2e from line 1	; ·		3	8,596,570
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			/ s.3 2x €	\$> 2 \rightarrow
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0	100	**
b	Other (Describe in Part XIV.)	4b	(155,716)	┥	ŠEL .
c	Add lines <b>4a</b> and <b>4b</b>			40	<del></del>
5 Part	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line Reconciliation of Expenses per Audited Financial Staten			5	-/:/
1 1			· · · · · · ·	1	8,222,345
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	• •		-4.999A	0,222,343
a	Donated services and use of facilities	2a	l	200 mm	
b	Prior year adjustments	2b	0	-1000	
C	Other losses	2c	0	- T	
d	Other (Describe in Part XIV.)	2d	155,716	4	. L
e	Add lines 2a through 2d		100,710	26	
3	Subtract line 2e from line 1			3	<del>-  </del>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	İ	1	1	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	l		
b	Other (Describe in Part XIV.)	4b	0		
	Add lines <b>4a</b> and <b>4b</b>			40	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			5	<del>-  </del>
Part .	XIV Supplemental Information				
Part V any ac Part X	ete this part to provide the descriptions required for Part II, lines 3, 5, and line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII ditional information.  II, Line 4B and Part XIII Line 2D: Cost of Goods Sold and Given.	, lines	2d and 4b. Also com	plete	e this part to provide
•••••	······				

Schedule D (For		Page 5
Part XIV	Supplemental Information (continued)	
	<del></del>	
	•••••••••••••••••••••••••••••••••••••••	
•		
		<b></b>

# SCHEDULE F (Form 990)

### **Statement of Activities Outside the United States**

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

The Foundation for a Christian Civilization, Inc. 23-7325778 General Information on Activities Outside the United States, Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the √ Yes 

□ No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b)\_Number\_of\_ offices in the (c).Number.of. (a) Region (d) Activities conducted-in-(e)-If-activity-listed in (d) is (f) Total region (by type) (e g , fundraising, program services, employees. a program service, describe specific type of expenditures for agents, and and investments region independent contractors investments, grants to recipients service(s) in region ın region in region located in the region) (1) South America None None Grantmaking N/A 189.610 Attending and speaking at (2) South America conferences and prayer vigils None None Program Services 74,566 Attending conferences and (3) Europe None delivering prayer petitions None **Program Services** 27,831 (4) (5) (6)(7) (8) (9) (10)(11)(12)(13)(14)(15)(16)(17)Sub-total . . . . N/A N/A За 292,007 Total from continuation sheets to Part I . . . 0 0 0

Totals (add lines 3a and 3b)

N/A

N/A

292.007

Schedule F (F	Schedule F (Form 990) 2011	Page 2
Part II	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,	90,
	Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000	
	Part II can be dunlicated if additional space is needed	

(1) South America general support 6,000 were transfer 0 IN/A IN/A (2) South America general support 6,000 were transfer 0 IN/A IN/A (3) (4) (5) (6) (7) (7) (8) (8) (8) (8) (8) (8) (8) (8) (8) (8	-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	tion section and EIN grant (c) Region (d) Purpose of grant (if applicable)	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	t e s	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
South America general support 6,000 wire transfer 0 NIA NIA NIA NIA NIA NIA NIA NIA NIA NIA	Ξ			South America	general support	180,000	wire transfer	-	0	I/A	N/A
Enter total number of recipent organizations listed above that are recognized as charifies by the foreign country, recognized as tax-exempt by the RS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	<u> </u>			South America	general support	6,000	wire transfer		0	I/A	N/A
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	ල										
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	3										
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the RS, or for which the grantee or course has provided a section 501(c)(3) equivalency letter	(2)							<del>-</del>			
Enter total number of recipient organizations listed above that are recognized as charifies by the foreign country, recognized as tax-exempt by the RS, or for which the grantee or counsel has provided a section 501 (c)(3) equivalency letter	(9)										
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the RS, or for which the grantee or counsel has provided a section 501(o)(3) equivalency letter	(3									:	
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(o)(3) equivalency letter rotal number of other organizations or entities	(8)										
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(o)(3) equivalency letter	(6)										
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	(10)										
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	(11)										
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	(12)										
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	(13)										
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	(14)										
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	(15)										
Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt  by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter  Enter total number of other organizations or entities	(16)										
Enter total number of other organizations or entities	N	Enter total nu by the IRS, or	mber of recipie for which the (	ent organizations lisi grantee or counsel?	ted above that are recc has provided a section	ognized as charitie 501(c)(3) equivaler	s by the foreign cour	try, recogniz	ed as ta	x-exempt	0
	က	Enter total nu	mber of other of	organizations or ent	ities			 -	•	<b>A</b>	4

Schedule F (Form 990) 2011

Page 3

Schedule F (Form 990) 2011

Part III Grants and Other As Part III can be duplic	Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.	<b>als Outside</b> e is needed.	the United State	s. Complete if the	organization	answered "Yes" t	to Form 990,	Part IV, line 16.
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	cription assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)				-		_		
(2)								
(3)				-	- 2	-		
(4)					===	-		
(2)				=	<u> </u>	_		
(9)				-				
(2)					<del></del>	_		
(8)								
(6)						-		
(10)					-			
(11)				-	1			
(12)						-		
(13)						-		
(14)						-		
(15)								
(16)								
(17)				-	-			
(18)					,			
						-	Schec	Schedule F (Form 990) 2011

Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)		☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	☐ Yes	<b></b> No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a		
	_qualified_electing_fund_during_the_tax_year?-If_"Yes,"_the-organization-may-be-required-to-file-Form_8621-, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)		✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)		<b>☑</b> No

### Part V

#### Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Part I, Line 2: Description of how grant funds are monitored outside of the country:
1. The grantee is required to provide an audited narrative and financial report to the Foundation on the use of the grant
funds. Such reports must include a narrative account of what was accomplished by the expenditure of the grant funds,
a financial statement of expenditures, copies of publications resulting from the grant, etc. The reports must be
attested to by the appropriate financial officer of the grantee organization and a certified public accountant.
In his opinion letter, the certified public accountant_should_clearly_state_that.the.grant.funds.were.expended.for
the purposes for which the grantee organization requested the same.
2. The grantee is required to maintain records of receipts and expenditures and to make its books and records
available for inspection by the Foundation when so requested.
3. The grantee shall acknowledge by letter the receipt of the grant funds. If these are made available in
installments, each installment shall be so acknowledged.
······································

### **SCHEDULE G** (Form 990 or 990-EZ)

**Supplemental Information Regarding Fundraising or Gaming Activities** 

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

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

✓ Mail solicitations

Part I

Employer identification number

The Foundation for a Christian Civilization, Inc. 23-7325778 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

**e** Solicitation of non-government grants

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

Form 990-EZ filers are not required to complete this part.

b ✓ Internet and email solicitation c ✓ Phone solicitations	าร	f L g [		on of government undraising events	-	
<ul> <li>d In-person solicitations</li> <li>2a Did the organization have a writ or key employees listed in Form</li> </ul>	990, Part VII) or	entity in co	onnection v	vith professional f	undraising services?	✓ Yes  ☐ No
<b>b</b> If "Yes," list the ten highest paid compensated at least \$5,000 by			draisers) pu	irsuant to agreem	nents under which the	tundraiser is to be
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have or control of outlons?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
Donor Care Center, Inc		Yes	No			
1 4535 Strausser St , NW North Canton, OH 44720	telemarketing		✓	231,944	135,330	96,614
2 DMW Worldwide, LLC 701 Leee Rd , Suite 103	consulting direct mail and data analy	51S	✓	512,183	240,289	271,893
3 Chesterbrook, PA 19087						
4						
5		• • • • • • • • • • • • • • • • • • • •				
6						
7						
8						<del>,</del>
9						
10						
Total			•	744,127	375,619	368,508
3 List all states in which the orga registration or licensing.			ensed to s	olicit contribution	s or has been notifie	d it is exempt from
Alabama, Alaska, Arizona, Arkansas, Cal Illinois , Hawaii, Indiana, Kansas, Kentuc						
Michigan, Minnesota, Mississippi, New H						
North Carolina, North Dakota, Ohio, Okla						
Carolina, Tennessee, Utah, Virginia, Was					of Columbia	
						·

Pa	art II	Fundraising Events. Cor than \$15,000 of fundraising gross receipts greater that	ng event contributions			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))
<u>o</u>			(event type)	(event type)	(total number)	
Revenue	1 2	Gross receipts Less: Charitable contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes			<u> </u>	
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
ct Exp	7	Food and beverages				
Dire	8	Entertainment			·	
	9	Other direct expenses .			<u></u>	
Pa	10 11 iri III	Direct expense summary. Ac Net income summary. Comb <b>Gaming.</b> Complete if the than \$15,000 on Form 9	e organization answer	olumn (d) nd line 10 red "Yes" to Form 99	0, Part IV, line 19, or	reported more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct			1			!
ឨ	4	Rent/facility costs				
	4 5	Rent/facility costs  Other direct expenses .			0/	
<u></u> -			☐ Yes% ☐ No	☐ Yes% ☐ No	☐ Yes%	A STATE OF THE STA
<u></u>	5	Other direct expenses .	□ No	□ No	날	
	5	Other direct expenses	No  Id lines 2 through 5 in co	No No olumn (d)	날	( )
	5 6 7 8 Er a Is	Other direct expenses  Volunteer labor  Direct expense summary. Act  Net gaming income summary  ther the state(s) in which the or the organization licensed to or	No  Id lines 2 through 5 in control  y. Combine line 1, column  ganization operates gar	No olumn (d) nn d, and line 7 ming activities: in each of these states	□ No ▶ ▶	🗌 Yes 🗌 No

Schedu	le G (Form 990 or 990-EZ) 2011 Pag	e <b>3</b>
11 12	Does the organization operate gaming activities with nonmembers?	
13	Indicate the percentage of gaming activity operated in:	
а		%
b		<del>~</del>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and	_
	records:	
	Name ►	
	Address►	
15a	Does the organization have a contract with a third party from whom the organization receives gaming	_
	revenue?	10
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the	
	_amount_of_gaming_revenue_retained-by_the-third-party-▶—\$	
С	If "Yes," enter name and address of the third party:	
	Name ►	
	Address ▶	
16	Gaming manager information:	
	Name ►	
	Gaming manager compensation ► \$	
	Description of services provided ▶	
	☐ Director/officer ☐ Employee ☐ Independent contractor	
17 a	Mandatory distributions:  Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	lo.
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$	
Part	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).	

**SCHEDULE 1** (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22 ► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection 201

Employer identification number

The Foundation for a Christian Civilization, Inc.	ization, Inc.						23-7325778
Part   General Information on Grants and Assistance	n on Grants and	Assistance					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	tain records to sub b award the grants	stantiate the amou or assistance?	int of the grants or	r assistance, the c	grantees' eligibility i	or the grants or assistanc	e, and
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	nization's procedu	res for monitoring	the use of grant fu	inds in the United	States.		
Part II Grants and Other Assistance to Governments	Assistance to Go		Organizations	in the United S	tates. Complete	and Organizations in the United States. Complete if the organization answered "Yes"	wered "Yes"
to Form 990, Part IV, line 21, for any recipient that reco Part II can be duplicated if additional space is needed	, line 21, for any ated if additional	recipient that rec space is needec	eived more than	1 \$5,000. Check 	this box if no one	received more than \$5,000. Check this box if no one recipient received more than \$5,000. ded	re than \$5,000.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) St. Louis de Montfort Academy,							General Support for educational
Inc.	23-2821348	501(c)(3) scho	190,000	0	0 N/A	N/A	and religious programs
(2) P.O. Box 787							
AUSSVIIIE, NO 00000							
(3)							
(4)							
(5)							
(9)							
(7)							
(8)							
(6)							
(10)							
(11)							
12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	in 501(c)(3) and gov	ı vernment organiza	tions listed in the l	ine 1 table			
3 Enter total number of other organizations listed in the line 1 table	organizations listed	d in the line 1 table					0 ◀
or Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instruction	is for Form 990.		Ö	Cat. No. 50055P		Schedule I (Form 990) (2011)

Schedule I (Fo	Schedule I (Form 990) (2011)						Page 2	
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  Part III can be duplicated if additional space is needed.	ividuals in the U space is needed.	nited States. Comp.	olete if the organiza	ation answ	ered "Yes" to	١.	
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method o FMV, app	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance	
1 Stipen	1 Stipends to priests for Masses.	4	068'9	0	N/A		N/A	
2								
ဗ								
4								
rc.								
9								
7								
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	e this part to prov	vide the information	required in Part I,	line 2, and	any other add	ditional information.	
Part 1: Auc	Part 1: Audited financial and narrative reports describing the use of grant	the use of grant fun	funds for the purposes of the grant are required for organizations that are not recognized	the grant are required	d for organiz	ations that are n	ot recognized	
as exempt	as exempt organizations under Section 501(c)(3). These reports are not required for organizations that are recognized as exempt organizations under Section 501(c)(3).	eports are not requi	ired for organizations t	hat are recognized as	exempt orga	nizations under	Section 501(c)(3).	
; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;								
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
		\$ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
					— — — — — — — — — — — — — — — — — — —			
							Schedule I (Form 990) (2011)	

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

**Transactions With Interested Persons** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

Open To Public

Department of the Treasury Internal Revenue Service Name of the organization

The Foundation for a Christian Civilization, Inc.

Employer identification number

23-7325778

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corr	ected?
	ta) Harrie of disqualified person	(b) Description of transaction	Yes	No
_(1)				
(2)				
(3)				
(4)				
(5)				
(6)		** - ** - **		
2	Enter the amount of tax imposed on the organization under section 4958			
3	Enter the amount of tax, if any, on line 2, above, reimb	<del> </del>		

Part II	Loans to and/or From Interested	ed Persons.					
	Complete if the organization ans	wered "Yes" o	n Form 990, Part I	/, line 26	, or Form 990-E	Z, Part V, li	ne 38a
	• •						

(a) Name of interested person and purpose		to or from nization?	(c) Original principal amount	(d) Balance due	(e) In o	lefault?	by bo	oroved pard or nittee?	(g) W agreer	
	То	From			Yes	No	Yes	No	Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)	1									
Total			▶ \$		*	1		3		

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
(1)			
(2)			
(3)			
_(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			

**Business Transactions Involving Interested Persons.** 

Part IV

	Complete if the organization ans	swered "Yes" on Form 990	0, Part IV, line 28a, 2	28b, or 28c.		
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	aring of zation's nues?
	•				Yes	No
(1)	Drake, Anne L.	Family member director	13.853	employment	- 103	1
(2)	Drake, Charles Michael	Family member director		employment		1
(3)	Drake, William	Family member director		employment		1
(4)	Hiegert, Magdalena	Family member officer		employment		1
(5)	Ritchie, John E.	Family member director		employment		1
(6)	Ritchie, Kevin E.	Family member director		employment		1
(7)						
(8)						
(9)						
(10)						
Par	t VSupplemental Information—	-				_
_	Complete this part to provide ac	dditional information for re	sponses to question	ns on Schedule L (see instruction	ons).	
•						
•••			<del></del>			

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

### Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

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

Employer identification number

The Foundation for a Christian Civilization, Inc. 23-7325778 Section C: Additionally doing business as: The American Society for Defense of Tradition, Family and Property; Crusade Magazine; TFP; ANF; TFP Student Action Part I, Line 6: Approximately 45 full-time volunteers. Over 100 people volunteered for one to two week periods making calls to recruit Rosary Rally Captains at the volunteer center. Many others volunteer on a part-time basis throughout the year. Part III, Line 4d: Public Witness - 728,465; Adult Formation - 674,468; Youth Formation - 532,509; Studies - 360,782; Seminars - 147,869 Part VI, Section A, Line 6: The Foundation is non-profit organization with corporate members. There is only one class of members. The members annually elect the Board of Directors and may accept new members or remove members. They may also remove directors and officers. A majority of the members may amend the bylaws of the organization. Members are prohibited from sharing in corporate earnings. Part VI, Section A, Line 2: Antonio Fragelli is the son of Luiz Antonio Fragelli. Part VI, Section A, Line 7a: The corporate members have this power. Part VI, Section A, Line 7b: The Board of Directors is elected by the corporate members (see explanation for Line 6 above for class, decisions requiring approval, and nature of voting rights). Part VI, Section B, Line 11A: The Treasurer prepares the Form 990, and a final copy of the 2011 Form 990 was provided to each board member. The Board of Directors will review the 990 at is monthly meeting in December. Part VI, Section B, Line 12c: The Conflicts of Interest policy covers directors, officers, and their family members. The Board of Directors makes the determination if a conflict of interest exists and reviews actual conflicts. A member of the board who received compensation from the Foundation for services is precluded from discussing and voting on matters pertaining to the compensation of other voting members of the board of directors. A. Each director annually signs a statement affirming they have received copy of the conflicts of interest policy, read and understood it, agree to comply, and understands the Foundation is a charitable organization and that in order to maintain its federal tax exemption it must engage primarily in activities which accomplish its tax-exempt purposes. B. The Board annually reviews if compensation agreements and benefits are reasonable whether transactions and/or arrangements with interested persons conform to the Conflicts of Interest Policy, and whether agreements with other charitable organizations, employees, and third party payors further the Foundation's charitable purposes and do not result in inurement or impermissible private benefit.

Page	2

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization	Employer identification number
The Foundation for a Christian Civilization, Inc.	23-7325778
Part VI, Section C, Line 17: Alabama, Alaska, Arizona, Arkansas, California, Connecticut, Florida, Georgi	a, Hawaii, Illinois, Indiana, Kansas
Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, New Hampshir	re, New Jersey, New Mexico
New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South C	arolina, Tennessee, Utah,
Virginia, Washington State, West Virginia, and Wisconsin.	
Part VI, Section C, Line 19: No documents available to the public.	
Part VII, Section A, Column B: Hours Dedicated to related organizations:	
St. Louis de Montfort Academy, Inc.: Raymond E. Drake, John W. Horvat, and Benjamin A. Hiegert: 2 ho	urs each per month.
Western Hemisphere Cultural Society, Inc: Benjamin A. Hiegert: 1 hour per month.	- 
Part XI: Line 5: Unrealized gain on investment carried at market value.	
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SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

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

Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

▶ See separate instructions.

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OMB No 1545-0047

Employer identification number

(g) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2011 No (f) Direct controlling Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Yes 23-7325778 (f)
Direct controlling
entity (e) End-of-year assets 509(a)(3) N/A 170(b)(1)(A)(ii) N/A Public charity status (if section 501(c)(3)) (d) Total income **Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Exempt Code section 501(c)(3) 501(c)(3) (c)
Legal domicile (state
or foreign country) Cat No 50135Y Legal domicile (state or foreign country) **Pennsylvania New York** (b) Primary activity Supporting Organizat (b) Primary activity **Boarding school** For Paperwork Reduction Act Notice, see the Instructions for Form 990. (1) Western Hemisphere Cultural Society, Inc. EIN: 13-3171782 1358 Jefferson Rd., Spring Grove, PA 17362 (a) Name, address, and EIN of disregarded entity (2) St. Louis de Montfort Academy, Inc. EIN: 23-2821348 P.O. Box 787, Rossville, KS 66533-0787 (a)
Name, address, and EIN of related organization The Foundation for a Christian Civilization, Inc. Part Part Ε 3

Schedule R (Form 990) 2011

Percentage ownership Percentage ownership S Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, Ilne 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) end-of-year assets 1)) General or managing partner? Yes No (g) Share of Code V—UBI amount in box 20 of Schedule K-1 (f) Share of total income (Form 1065) (e)
Type of entity
(C corp, S corp,
or trust) (h) Disproportionate ŝ allocations? Yes (g) Share of end-ofyear assets (d)
Direct controlling entity (f) Share of total Income Legal domicile (state or foreign country) (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) Primary activity (d) Direct controlling (c)
Legal
domicile
(state or
foreign (a) Name, address, and EIN of related organization (b) Primary activity Ξ (1) (7) related organization (a) Name, address, and Part III Part IV 8 ପ € 3 9 Ξ <u>N</u> ල € 3 9 E

Schedule R (Form 990) 2011

	35a, or 36.)
	rt IV, line 34, 35,
<del>,                                     </del>	zations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)
	answered "Yes"
	te if the organization
	ons (Complete if
	ated Organizati
1	ctions With Rela
dule R (Form 990) 201	rt V Transac
Sch	g.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			Yes	s No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	lated organizations list	ed in Parts II-IV?		
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	•		1a	>
<b>b</b> Giff, grant, or capital contribution to related organization(s)	•		1b <	
c Gift, grant, or capital contribution from related organization(s)	•		10	
d Loans or loan augrantage to or for related organization(s)			7	
	•		<u> </u>	<b>&gt;</b>
e Loans or loan guarantees by related organization(s)	•		- 16	>
CO. C. C. C. C. C. C. C. C. C. C. C. C. C.				
Sale of assets to related organization(s)	•		F .	>
g Purchase of assets from related organization(s)	· ·		19	>
h Exchange of assets with related organization(s)	-		4	/
i Lease of facilities, equipment, or other assets to related organization(s)			<b>;</b>	>
j Lease of facilities, equipment, or other assets from related organization(s)	•			>
k Performance of services or membership or fundraising solicitations for related organization(s)	•		- <del>+</del>	_
l Performance of services or membership or fundraising solicitations by related organization(s)	•		<b>=</b>	>
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	•		- TE	
n Sharing of paid employees with related organization(s)	•		1n 🗸	
			<b>9</b>	>
<b>p</b> Reimbursement paid by related organization(s) for expenses	•		1p .	-
	•		14	>
	•		- 1r	>
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	is line, including covere	ed relationships and trans	saction thresh	olds.
(e) :	<b>(</b> 2)	9	(D)	
Name of other organization	Transaction type (a-r)	Amount involved	Method of determining amount involved	mınıng
St. Louis de Montfort Academy, Inc.				
	q	190,000 Cash	Cash	
(2)				
6				
(4)				
	-			
(9)		2000	Cohodina Differences	150
		ocue	aule n (rorm 98	רוטג (טי

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than for gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	entity taxed as ganization. See	a partnership t	nrough which the	ne organiza on for certa	tion conducted I	nore than five artnerships.	percent of it	p through which the organization conducted more than five percent of its activities (measured by total assets regarding exclusion for certain investment partnerships	sured by to	al assets
(а) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	Are all partners section 501(c)(3) organizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Oisproportionate allocations?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	(k) Percentage ownership
			section 512-514)	Yes No			Yes No		Yes No	
							li li			
						-				
						-				
						-				
	 					-		Sche	Schedule R (Form 990) 2011	1 990) 2011
						_				

Schedule R (F	Form 990) 2011	Page 5
Part VII	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).	<u> </u>
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