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SCANNED NOV 2 6 2013

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 benefit trust or private foundation)

2012 Open to Public

OMB No 1545-0047

Dep Inter	artment of t nal Revenu	ne Treasury Service	ne organization ma	y have to use	a copy of this re	turn to satisf	fy state rep	orting requi	irements	Inspect	tion
A	For the	012 calendar year	r, or tax year begi	nning	July	, 2012, a	nd ending	Ju	ne 30	, 20 13	
В	Check if a		forganization The C		itute, Inc.				D Employ	er identification n	umber
	Address o	nange Doing Bi	usiness As C.S. Lev	wis Institute		_				54-1802015	_
	Name cha	nge Number	and street (or PO be	ox if mail is not o	lelivered to street a	address)	Room/suite	,	E Telepho	ne number	
	Initial retu	n 8001 Bra	ddock Road				30	01		703-914-5602	
	Terminate	City, tow	vn or post office, state	e, and ZIP code							
	Amended	return Springfie	eld, VA 22151-211	0					G Gross re	eceipts \$	1,164,575
	Applicatio	pending F Name an	nd address of principa	al officer				H(a) Is this	a group return	for affiliates? Yes	✓ No
		Kerry A.	Knott - address s	ame as above	•			H(b) Are a	ıll affiliates ir	ncluded? 🗌 Yes	☐ No
$\overline{\Box}$	Tax-exem	ot status 🗹 501	1(c)(3)	01(c)() 1	(insert no) 🗌 4	947(a)(1) or	527	If "N	No," attach a	a list (see instructio	ns)
J	Website:	www.cslewis	institute.org					H(c) Grou	p exemption	n number 🕨	
K	Form of or	ganization. 🗸 Corpora	ation 🗌 Trust 🔲 A	ssociation 🔲 C)ther ▶	L Yea	ar of formatio	n 1976	M State	of legal domicile	MD
P	art I	Summary									
	1 1	Briefly describe th	ne organization's	mission or n	nost significant	t activities:	The C.S.	Lewis Ins	titute deve	elops disciples i	who can
ø	4	rticulate, defend,	and live faith in C	hrist through	personal and p	ublic life					
Š	_										
Ĕ	_										
ŏ		Check this box					sposed of	more tha	n 25¦% of	its net assets.	
Activities & Governance		lumber of voting		-					1		14
es		lumber of indepe	•		-						13
ξ		otal number of ir				Part V, line	2a) .		. 5		7
Ç		otal number of v							. 6		6
•		otal unrelated bu							. 7a		0
	b	let unrelated bus	iness taxable inc	come from Fo	orm 990-T, line	34	• • •	<u> </u>	. 7b		0
							<u> </u>	Pnor Y		Current Ye	ar
ē	1	Contributions and	-				· ·		811,938		924,023
e E	1	Program service r	•				· · _		37,705		56,001
Revenue	1	nvestment incom	•				· ·		64		65
_		Other revenue (Pa					·: -		80,612		184,486
		otal revenue-ad					ne 12)		930,319		<u>1,164,575</u>
		Brants and simila				3)	· ·				
		Benefits paid to o					_∵: ⊢	—			
es		Salaries, other con					5-10)		354,820		379,577
Expenses		Professional fund				1071		88% Abr >	135 × 200	. <886.1 800 / NoSeo. ** T	**
X	_ b	otal fundraising	expenses (Part I)	X, côtaman (D)	(1) 25 20 20 10 10 10 10 10 10 10 10 10 10 10 10 10	<u> 3 9 </u> 8	86,253	<u> </u>	1975, 1977		<u> </u>
ш	17	Other expenses (F	Part IX, column (A), lines 11a	ગનd, 191=24e)		· ⊢		582,999		752,800
	18	otal expenses. A	Add lines 13-17 (must equal-	art-IX, column	TA), line-25	" · ⊢		937,819		<u>1,132,377</u>
		Revenue less exp	enses. Subtract	line 18 from	ingetuzzini, k	<u> </u>	· ·	connect of C	-7,500	End of Ye	32,198
SOC			V (' 40'	-			E	ginning of C			
Net Assets or Fund Balances	20	Total assets (Part					· · ⊢		136,540		261,963
ž į	21	Total liabilities (Pa	-	· · · · · ·	rom line 20		· · · ⊢		45,027		138,252
		Net assets or fund Signature Blo		ract line 211	TOTT TITLE 20	<u> </u>		_	91,513	<u> </u>	123,712
	art II	es of perjuty, I declare		ed the creatern inc	hudaa eeeemaan	una cobadular	nod etatom	ents and to	the best of	my knowledge, and	l helief it is
tru	ider periali ie, correct,	and complete Declar	ation of preparer (d)th	er than officer) is	based on all infor	mation of which	ch preparer l	nas any knov	vledge	my knowledge and	. 00::01, 11:13
_		、1.\ ////-	2 m / X	Wen					11-6-	ハス	
Sig	n	Signature of off			-	-		b	ate		
He			V D=	110 A	reasur.	es					
		Type or print na	arme and title								
_		Print/Type prepare		Prepare	r's signature		Date		Charle	PTIN	
Pa									Check self-em	ployed	
	eparei	L = 1 N	·					Fir	m's EIN ▶		
US	se Only	Firm's name							one no		
Ma	v the IR	6 discuss this ret	urn with the pred	parer shown	above? (see in	structions)	.			Ye:	s 🔲 No
_		ork Reduction Act					Cat No	11282Y		Form	990 (2012)

	0 (2012)				Page 2
Part		ment of Program Service		111	_
		ribe the organization's mis	a response to any question in this Part	<u>III</u>	<u> </u>
. 1	-	=	oles who can articulate, defend, and live fait	h in Christ through personal ar	nd nublic life
	Did AL				
2	prior Form 9	990 or 990-EZ?	gnificant program services during the year		ne ☐ Yes ☑ No
^		scribe these new services			
3			ting, or make significant changes in he		
	If "Yes," des	scribe these changes on S	Schedule O.		
4	expenses. S	Section 501(c)(3) and 501(service accomplishments for each of its c)(4) organizations are required to report y, for each program service reported.		
4a			688,015 including grants of \$	<u>o</u>) (Revenue \$	54,081)
	Discipleship	& mentoring			
4b	(Code:) (Expenses \$	63,803 including grants of \$) (Revenue-\$	1 920)
1.0	Conferences			/(/,325
				•••••	
					•••••
				••••••	
		•••••••			
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
				•••••••	•••••

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$
4e Total program service expenses ▶

) (Revenue \$

751,818

art	V Checklist of Required Schedules			
_	1. the county 11 or 1		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	١.	,	
•	· · · · · · · · · · · · · · · · · · ·	1 2	1	-
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	12	-	
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			Ť
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			1
	Part III	_5_		Ľ
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			1
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		/
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	- 6		-
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	i		١.
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
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	40	ļ	,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10	58 3333	√
••	VII, VIII, IX, or X as applicable.	333		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	2000	200 Sais_	38832
_	complete Schedule D, Part VI	11a	✓	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	l		
a	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
a	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<u> </u>	7
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1	 -	<u> </u>
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			1
_	Schedule D, Parts XI and XII	12a	ļ	<u> </u>
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 and XII is optional	40		✓
13		12b		1
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	14a	7	*
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		Ť	
	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	✓	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
40	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	✓
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	4.0		,
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		1
••	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	<u> </u>		'
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
••	If "Yes," complete Schedule G, Part III	19		1
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

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		1
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		1
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		1
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		√
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		√
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		✓
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or 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		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	7		
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
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? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		√
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I </i>	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		√
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charatable 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? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	<u> </u>

Part	V Statements Regarding Other IRS Filings and Tax Compliance		-	
	Check if Schedule O contains a response to any question in this Part V			. 🗆
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	o 📆	. 6	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b		1.6	, n
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		(%,	1
	reportable gaming (gambling) winnings to prize winners?	1c		1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	XXX	1 8	1000
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	6 8	-3	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	· X-	}	· ·
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
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			1
	account)?	4a		1
b	If "Yes," enter the name of the foreign country: ▶	\$7.7.25 B	(**** <u>%</u>	· :- ,%
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	F	1 3	is .
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
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 as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	200		186
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			<i>"</i>
	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	1	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	5.3%	×	ě.
е	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		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
ň	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	, ~%	<u>د .</u>	\$ 3 _{0.00}
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	10	***	*****
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		; XXV (×200000
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	Bur		. ,
а	Initiation fees and capital contributions included on Part VIII, line 12		1.	·
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	7 🐐	;	``````
11	Section 501(c)(12) organizations. Enter:	7 ^		
а	Gross income from members or shareholders	:%	٠,	7.7
b	Gross income from other sources (Do not net amounts due or paid to other sources	٦,	l.	* 1
	against amounts due or received from them.)			v.
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		, .	3
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	, & z	<u> </u>	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	Ĺ	
	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		ĺ ·	
	the organization is licensed to issue qualified health plans		1	0
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
L	If "Vos." has it filed a Form 720 to report those payments? If "No." provide an explanation in Schodulo O	14h	I	l

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	ee ins	tructi	
-	Check if Schedule O contains a response to any question in this Part VI		• •	<u> </u>
Secti	on A. Governing Body and Management			
	en al la companya de	190M/s c	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 15	·*****	,	/ &
	If there are material differences in voting rights among members of the governing body, or	134	, <u>,</u>	, A
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	137	37	****.
		13	1,	4
ь 2	Enter the number of voting members included in line 1a, above, who are independent . 1b 14 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	4	33	***
2	any other officer, director, trustee, or key employee?		خنگ	4
3	Did the organization delegate control over management duties customarily performed by or under the direct	_2		/
3	supervision of officers, directors, or trustees, or key employees to a management company or other person? .			,
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3		∀
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	5		✓
6	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		V
7a	Did the organization have members or stockholders, or other persons who had the power to elect or appoint	-		-
7 4	one or more members of the governing body?	70		1
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a		<u> </u>
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	S. 1880 v	7'a 28
·	the year by the following:			
а	The governing body?	8a		
b	Each committee with authority to act on behalf of the governing body?	8b	<u> </u>	-
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	- 05		
•	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		ode.)	<u>' ' </u>
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	√	
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	✓	İ
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	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	N. C.	***	198
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	√	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	
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	1	
14	Did the organization have a written document retention and destruction policy?	14	\	
15	Did the process for determining compensation of the following persons include a review and approval by	g-18"	***	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	✓	<u></u>
b	Other officers or key employees of the organization	15b	✓	<u> </u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a		(\{ \{ \frac{1}{2} \cdots}	(3)	
	with a taxable entity during the year?	16a		✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		5	`
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		<u> </u>
	on C. Disclosure		_	
17	List the states with which a copy of this Form 990 is required to be filed none none	E04	-\(O\-	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	1 201(င)(၃)S	only)
	available for public inspection. Indicate how you made these available. Check all that apply.			
40	Own website Another's website Upon request Other (explain in Schedule O)	6 i=4	- c-c	ر معالمه
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o and financial statements available to the public during the tax year.	ı mel	esi p	oiicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the		
20	Organization: Milliam P. Deven, address same as above - 703-914-5602	J. 1116	•	

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-orm	990	(2012)	

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key 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	nor any relate	d org	aniz			ompe	nsa	ated any currer	nt officer, directo	r, or trustee.
				•	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average hours per week (list any	box,	unles	s pe	rson	e than one of the thick th	n an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	hours for related organizations below dotted line)		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) Kerry A. Knott, President	40	✓		1	√			0	0	15,396
(2) Thomas W. Sımmons, Executive V.P.	40			1				53,000	0	7,716
(3) Joel S. Woodruff, V.P. of Discipleship	40			✓				80,000	o	15,396
(4) Thomas A. Tarrants III	40			1				80,000	0	3,000
(5) Marlise Streitmatter, Secretary	1	1		1				0	0	0
(6) William R. Deven, Treasurer	16	1		1				0	0	0
(7) Chris T. Morris, Chairman of the Board	2	1						0	0	0
(8) Timothy Bradley, Director		1						0	0	0
(9) John Chow, Director		1						0	0	0
(10) Lynn T. Hendricks, Director		1						0	o	0
(11) James R. Hiskey, Director		1						0	0	0
(12) Karl Johnson, Director		1						0	0	0
(13) Jimmy Cheng-Ho Lin, Director		1						0	0	0
(14) Bruce Matson, Director		1						0	0	0

Part VII Section A. Officers, Directors, Tru	stees, Key E	mplo	yees			lighe	st C	ompensated E	mployees (co	ntını	red)
- (A) Name and title	(B) Average hours per week (list any	box,	unles	Pos neck ss pe d a d	rson	than on the thick the thic	an tee)	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		compensation from the organization and related organizations
(15) Carl R. Meyer, Director		1						o		0	0
(16) Susan O. Ward, Director		1						0		0	0
(17) Kathy W. Wright, Director		1						0		0	0
(18)											<u>*</u>
(19)											
(20)											
(21)											
(22)											· · · · · · · · · · · · · · · · · · ·
(23)											
(24)											
(25)											
1b Sub-total	t VII, Sectio		•	•			> > >	213,000 0 213,000		0	41,508
Total number of individuals (including be reportable compensation from the organization)	ut not limited						e) w				41,508 of
3 Did the organization list any former employee on line 1a? If "Yes," complete	officer, direc										Yes No
For any individual listed on line 1a, is to organization and related organization individual	s greater th	an \$	150,	000	i? II	f "Ye	s, "	complete Sch			
5 Did any person listed on line 1a receive for services rendered to the organization											5 1
Section B. Independent Contractors									-		
 Complete this table for your five highes compensation from the organization. R year. 											
(A) Name and business a	ddress							(B) Description of s	ervices		(C) Compensation
											0
Total number of independent contract received more than \$100,000 of competitions.							th	ose listed abo	ove) who	Ý,	*

Part	Part VIII Statement of Revenue								
		Check if Schedule O contains a response	nse to any dues	tion in this Part	VIII				
1. 160	u. R/3.	San All San	Se Sales any ques			(c)	(D)		
ř				(A) Total revenue	(B) Related or exempt	(C) Unrelated business	Revenue excluded from tax		
K 43					function revenue	revenue	under sections 512, 513, or 514		
Sis	1a	Federated campaigns 1a	<u> </u>	a / }	16Verius	2 5 %	312, 313, 01 314		
ts, Grants Amounts	b	Membership dues 1b	· · · · · · · · · · · · · · · · · · ·	All Services	\$ 15 15 W		, 3, ; 3 ,		
ي ق	C	Fundraising events 1c	58,520	Sim with with		1 % O. 3			
Gifts, ilar Ar	ď	Related organizations 1d	_ 38,320						
ons, Giff Similar	e	Government grants (contributions) 1e			Section of the section of		1. O. S.		
Contributions, and Other Sim	f	All other contributions, gifts, grants,			1		3		
tributio Other	•	and similar amounts not included above	865,503	THE STATE OF THE S					
ğ ţ		Noncash contributions included in lines 1a-1f: \$	6,364			English of			
Cont	g h	Total. Add lines 1a–1f		024.022					
	- 11	Total: Add lines 1a-11	Business Code	924,023	200 22 200 2 3 C				
nue	2a	Conferences and lectures	545635 6546	1.020		<u> </u>			
3e	b	Discipleship and mentoring		1,920					
ce	0	Discipleship and mentoring		54,081	54,081				
įΣ	d								
Š	u					·—·			
Jran		All other program service revenue .							
Program Service Revenue	, n	Total. Add lines 2a–2f	▶	50.004					
	<u>g</u> 3	Investment income (including divident		56,001	W. C.	字 (영화) (1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
		and other similar amounts)		e E		65			
	4	Income from investment of tax-exempt be		65		65			
	5	·	•	92	02				
	J	Royalties	(ii) Personal	192 1924 14 150	92	848 · · · * * · · · * · · · · · · · · · ·	642 . SV. 844 'S		
	6a	Gross rents	(","		KADINET S				
	b	Less: rental expenses		1.45 6 10					
	i	Rental income or (loss)							
	d	Net rental income or (loss)	l	<u> </u>	and the second s	<u> </u>			
	7a	Gross amount from sales of (i) Securities	(II) Other	\$ 3 1 h 1	Q 200 NO 18		4 St. 1884		
	7.4	assets other than inventory	(", " " " " " " " " " " " " " " " " " "						
	ь	Less: cost or other basis							
		and sales expenses .				4			
	С	Gain or (loss)					Evy Control		
	d	Net gain or (loss)	<u> </u>	 			<u> </u>		
	u	Net gain or (loss)		W 45 4 78	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· · · · · · · · · · · · · · · · · · ·			
nue	8a	Gross income from fundraising		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	la de la composición della com				
		events (not including \$							
ev.		of contributions reported on line 1c).			and Market and				
<u>۲</u>		See Part IV, line 18 a			× 10 00 20 00 0				
Other Reve	b	Less: direct expenses b		Salah Salah	双流流流		\$ \$ 4 TO		
0		Net income or (loss) from fundraising	events . ►	<u>*</u>					
		Gross income from gaming activities.	OVOITS . P		· · · · · · · · · · · · · · · · · · ·	<u> </u>	***		
	Ja	See Part IV, line 19 a		ž s m	Gra,	1 1			
	ь	Less: direct expenses b	<u> </u>		1 ""		3		
	C	Net income or (loss) from gaming acti	L		-				
	_	Gross sales of inventory, less			έ		, ,		
		returns and allowances a	10 121	\$ · · · · • · ·	E - 1/4 1/5 1	· 🏂 🦠	· (\$\dag{\psi} \dag{\psi} \dag{\psi} \dag{\psi}		
	ь	Less: cost of goods sold b	10,101		,	ي څ			
	C	Net income or (loss) from sales of inve	,	20 620	20 620	-	<u> </u>		
	<u> </u>	Miscellaneous Revenue	Business Code	28,628	-28,628	2			
	11a		333333333333	3,312	<u> </u>				
	b	Miscellaneous Donated services		209,710					
	C	Duridlen 261 AICE2	 	209,710	203,710				
	d	All other revenue							
	e	Total. Add lines 11a-11d		213,022		,	. 1		
	12	Total revenue. See instructions.		1.164.575		'\ <u>s\\</u> ;			

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).

000000	or our (c)(c) and our (c)(+) or gamzations mast cor				, ,
	Check if Schedule O contains a respor	se to any question	in this Part IX		
Do no	ot include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
8b. 9t	o, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising
	·		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				·
2	Grants and other assistance to individuals in				A CH + 18 13 1
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,			1/20 10 10 10 10 10 10 10 10 10 10 10 10 10	13 x2 30 7
Ū	organizations, and individuals outside the				
	9				All March 1.
	United States. See Part IV, lines 15 and 16			Carried State	
4	Benefits paid to or for members			18. 11. 14. 14. 14. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15	H M - The She
5	Compensation of current officers, directors,				
	trustees, and key employees	213,000	100 500	26 500	
•		213,000	186,500	26,500	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	107,961	22,500	81,361	4,10
8	Pension plan accruals and contributions (include	107,001	22,000	01,001	7,10
•	section 401(k) and 403(b) employer contributions)				
_					
9	Other employee benefits	46,685	41,508	5,177	
10	Payroll taxes	11,931	3,749	7,868	31-
11	Fees for services (non-employees):				
а	Management				
	-	4.000		4.000	
b	Legal	1,833	1	1,833	-
C	Accounting	3,202		3,202	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		&		
f	Investment management fees	·			-
~	Other. (If line 11g amount exceeds 10% of line 25, column				
g	(A) amount, list line 11g expenses on Schedule O.)	20.740			
	- ·	82,748	82,748		
12	Advertising and promotion				
13	Office expenses	13,723	6,862	6,862	
14	Information technology	26,009	20,807	5,202	
15	Royalties				
16	Occupancy	45,026	22,513	22,513	
17	Travel				
		28,039	26,762	1,277	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	148,855	148,855		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	****			
	•	722		722	
23	Insurance	3,429	2 20 Address	3,429	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)			1	100
_					W
a	Newsletters	57,991	57,991		
b	Fundraising	7,760			7,760
С	Banquet	74,079			74,079
d	Donated Services	209,710	160,000	49,710	
e	All other expenses	49,674	24,837	24,837	
25	Total functional expenses. Add lines 1 through 24e				00.05
	Joint costs. Complete this line only if the	1,132,377	805,632	240,492	86,25
26	organization reported in column (B) joint costs		-		
	from a combined educational campaign and				
	fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O Contains a response to any question in this Part (4) (6)		aitA	Oh all 16 Oak adula O a antaina a managanta and a salah in this Da	4 V		
1			Check if Schedule O contains a response to any question in this Par	<u>πχ</u>	: :	<u> U</u>
1	-			(A) Beginning of year		
Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees and sponsoring organizations of section 501(c)(8) voluntary employees and sponsoring organizations of section 501(c)(8) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part II of Schedule D 10b 12,335 11 Investments—publicly traded securities 11 Investments—program-related. See Part IV, line 11 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines: I through 15 (must equal line 34) 17 Accounts payable and accrued expenses 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Exerce wor crustodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustess, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 21 Cans and other payables to urrelated third parties 22 Organizations that follow SFAS 117 (ASC 958), check here ▶ and complete lines 27 through 29, and lines 33 and 34. 23 Fortal liabilities, including inderal income tax, payables to related third parties 24 Unsecured mortgages and notes payable to urrelated third parties 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ and complete lines 27 through 29, and lines 33 and 34. 24 Unrestricted net assets 25 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete line		1	Cash—non-interest-bearing	86,367	1	68,751
A Accounts receivable, net S		2	Savings and temporary cash investments	30,040	2	100,106
tustesse, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loars and other receivables from other disqualified persons (as defined under section 4956(c)(3)(8), and combibuting employers and sponsoring organizations of section 4956(c)(3)(8), and combibuting employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and cleans receivable, net Inventories for sale or use 9 Prepaid expenses and deferred charges 5,405 9 79,911 10a Land, buildings, and equipment: cost or other basis. Complete Part II of Schedule D Less: accumulated depreciation 10b 12,435 2,455 10c 1,733 11 Investments – publicly traded securities 11 Investments – program-related. See Part IV, line 11 12 Investments – program-related. See Part IV, line 11 13 Investments – program-related. See Part IV, line 11 14 Intangle assets 5.00 16 16 261,963 17 Accounts payable and accrued expenses 4.891 17 14,075 18 Grants payable 5 Compensated employees, and disqualified persons. Complete Part II of Schedule D 2 Loans and other payables to current and former officers, directors, trustess, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 2 Tax-exempt bond liabilities of included on lines 17-24). Complete Part X of Schedule D 2 Total liabilities, and other liabilities (including federal income tax, payables to related third parties 2		3	Pledges and grants receivable, net		3	
trustess, key employees, and highest compensated employees. Complete Part II of Schedule L Lans and other receivables from other disqualified persons (as defined under section 4958(QIII), persons described in section 4958(QISIC), and contributing employers and sponsoring organizations of section 501(QII) voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10b 12,435 11 Investments—publicly traded securities 12 Investments—publicly traded securities 12 Investments—publicly traded securities 13 Investments—publicly traded securities 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 11 though 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 22 Complete Part II of Schedule D 23 Secured mortgages and notes payable to urrelated third parties 24 Unsecured notes and loans payable to urrelated third parties 25 Other liabilities, including federal income tax, payables to related third parties 26 Total liabilities, and lines 17 through 25 27 Unrestricted net assets 28 Permanently restricted net assets 29 Organizations that follow SFAS 117 (ASC 958), check here b and complete lines 27 through 24, and lines 28 through 34 29 Permanently restricted net assets 29 Organizations that follow scales and lines in through 15 through 34 30 Capital stock or trust principal, or current fun		4	Accounts receivable, net	85	4	4,635
4956(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). Complete Part II of Schedule L. 6 7 7 7 7 7 7 7 7 7		5	trustees, key employees, and highest compensated employees.			
9 Prepaid expenses and deferred charges	sets	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		6	2 2 2 300
9 Prepaid expenses and deferred charges		7				
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10a 14,168 b Less: accumulated depreciation 10b 12,435 2,455 10c 1,733 11 Investments – publicly traded securities 11 1 12 12 Investments – tother securities. See Part IV, line 11 1 12 13 Investments – program-related. See Part IV, line 11 1 13 14 Intangible assets 1 14 1 15 15 Other assets. See Part IV, line 11 1 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 136,540 16 261,963 17 Accounts payable and accrued expenses 4,991 17 14,075 18 Grants payable . 18 19 Deferred revenue 40,136 19 124,177 20 Tax-exempt bond liabilities 12 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable unsecured third parties 24 Unsecured notes and loans payable unsecured third parties 24 Unsecured notes and loans payable unsecured	As			12.187	8	6.829
10a		_				
b Less: accumulated depreciation 10b 12,435 2,455 10c 1,733 1 1 1 1 1 1 1 1 1		_	Land, buildings, and equipment: cost or			
11 Investments — publicly traded securities 11 12 10 12 10 12 10 13 14 15 13 14 11 13 14 11 15 15 14 15 15 16 16 16 16 16 16		ь	 		10c	1.733
12 Investments – other securities. See Part IV, line 11 13 Investments – program-related. See Part IV, line 11 13 14 Intangible assets 14 15 15 15 15 15 15 16 16		11	,			
13 Investments—program-related. See Part IV, line 11 14 Intangible assets 14 14 Intangible assets 15 Other assets. See Part IV, line 11 15 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 136,540 16 261,963 17 Accounts payable and accrued expenses 4,891 17 14,075 18 19 Deferred revenue 40,136 19 124,177 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Unsecured notes and loans payable to unrelated third parties 25 Unsecured notes and loans payable to unrelated third parties 25 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Unsecured notes and loans payable to unrelated third parties 25 Unsecured notes and loans payable to unrelated third parties 25 25 25 25 25 25 25 2			· ·		12	
14 Intangible assets 14 15 15 Other assets. See Part IV, line 11 15 15 15 Other assets. See Part IV, line 11 15 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 136,540 16 261,963 17 Accounts payable and accrued expenses 4,891 17 14,075 18 Grants payable 18 18 19 Deferred revenue 40,136 19 124,177 120 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Unsecured notes and loans payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Unrelative (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 25 25 25 25 25 25		13			13	-
15		14		,	14	
16		15			15	
17		16	•	136,540	16	261,963
18 Grants payable 18 18 19 Deferred revenue 20 124,177 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 24 Unsecured notes and loans payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 25 25 25 25 25 25		17		4,891	17	14,075
20 Tax-exempt bond liabilities		18	Grants payable		18	
21 Escrow or custodial account liability. Complete Part IV of Schedule D . 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		19	Deferred revenue	40,136	19	124,177
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		20	Tax-exempt bond liabilities		20	
trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	bilities	22	trustees, key employees, highest compensated employees, and		22	
Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	<u>=</u>	22				
Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	_	1				
Total liabilities. Add lines 17 through 25		ł	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
Organizations that follow SFAS 117 (ASC 958), check here □ and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets		26		45 027		139 252
34 Total liabilities and net assets/fund balances	— Sa		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ an	nd Signature Section 1997	*	
34 Total liabilities and net assets/fund balances	Š	27	•	A CALLEST TO A CONTROL OF THE PARTY OF THE P		00 712
34 Total liabilities and net assets/fund balances	<u>a</u>	l				
34 Total liabilities and net assets/fund balances	8	l	· · · ·	00,314		23,000
34 Total liabilities and net assets/fund balances	or Fun		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and	d	1	
34 Total liabilities and net assets/fund balances	ts (30	Capital stock or trust principal, or current funds			
34 Total liabilities and net assets/fund balances	šše	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
34 Total liabilities and net assets/fund balances	Ä	32				
34 Total liabilities and net assets/fund balances	Net	33		91,513		123,712
		34	Total liabilities and net assets/fund balances	136,540	34	

_	4	4
Page	- 1	4

	SU Describer of New Assessment			Page 12
Par				_
	Check if Schedule O contains a response to any question in this Part XI		T	<u>. U</u>
. 1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>161,575</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,	132,377
3	Revenue less expenses. Subtract line 2 from line 1	_ 3		32,198
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		91,513
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10		123,712
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII		<u> </u>	<u> </u>
			Yes	
1	Accounting method used to prepare the Form 990: Cash Accrual Other		in 🔻	
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	1 / 1 %	
	Schedule O.		4 6 B	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled /	or	
	reviewed on a separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		. 2b	✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on	a 👔 🕌	
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			أنظالا
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or			1
	of the audit, review, or compilation of its financial statements and selection of an independent according			
	If the organization changed either its oversight process or selection process during the tax year, e.	(plain	in 🔍 🍇	
	Schedule O.		گئے دیکے	& 11 ⁻⁷
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set		in	
	the Single Audit Act and OMB Circular A-133?		· 3a	/
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo		те	1
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits	3b	Ш_
			Form 99	0 (2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► 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

Inspection Employer identification number

The C	C. S. Lewis Institu									302015
Par			rity Status (All orga						instruction	ons.
The o	organization is no	ot a private found	ation because it is: (Fo	or lines 1	through 1	1, check	only one	box.)		
1 2 3 4	A school des A hospital or A medical re	scribed in sectior a cooperative ho	ches, or association of n 170(b)(1)(A)(ii). (Attac ospital service organiza on operated in conjun te:	ch Sched ation des	ule E.) cribed in :	section [·]	170(b)(1)	(A)(iii).)(iii). Enter the
5	An organiza	-	the benefit of a colle	ge or un	iversity o	wned or	operated	I by a go	vernmen	tal unit described in
6 7	An organiza	tion that normally	rnment or government rreceives a substantia)(A)(vi). (Complete Pai	al part of					nit or fror	n the general public
8	A communit	y trust described	in section 170(b)(1)(A)(vi). (Co	mplete Pa	art II.)				
9	receipts from	n activities relate n gross investme	receives: (1) more that d to its exempt funct ent income and unre after June 30, 1975. So	ions-su lated bu	bject to d siness ta	certain ex xable ind	ceptions	s, and (2) ss sectio) no more	e than 331/₃% of its
10	An organizat	ion organized and	d operated exclusively	to test for	or public s	safety. Se	e sectio	n 509(a)((4).	
11 e	purposes of 509(a)(3). Cl a Type By checking other than for section 50 If the organ organization	one or more pulneck the box that I b Type this box, I certify bundation manag 09(a)(2). Ization received , check this box	that the organization ers and other than on a written determination	nizations supportir I-Functio is not co e or more on from	described ng organiz nally integ ntrolled de publicly the IRS t	d in sect zation and grated lirectly or supported that it is	ion 509(a d comple d indirectled organ a Type	a)(1) or set the lines 1 Type III–N by by one by the lines of the line	ection 50 11e through the thro	19(a)(2). See section gh 11h. tionally integrated disqualified persons d in section 509(a)(1)
9	following pe	rsons?	indirectly controls, eit		_					nd Yes No
			ody of the supported							11g(i)
	(ii) A family	member of a pers	on described in (i) abo	ove?						11g(iı)
		-	a person described in							11g(iu)
h			tion about the support							
(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col (i) li	organization sted in your document?	the organ	ou notify nization in of your port?	organizat (ī) organi	is the tion in col ized in the S?	(vii) Amount of monetary support
				Yes	No	Yes	No	Yes	No]
(A)										
(B)										
(C)										
(D)										
(E)										
T-4-		39 %	* * * *	4.	5 K.	ý.	*** **	-t, *	,î	

Part	(Complete only if you checked the	ne box on line	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qua	•
Secti	Part III. If the organization fails to on A. Public Support	o quality unde	er the tests lis	stea below, p	ilease comple	ete Part III.)	
-	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2000	(b) 2009	(0) 2010	(d) 2011	(6) 2012	(i) Total
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.	1. 11 × 100 × 100			4.7		
	on B. Total Support	(=) 0000	(h) 0000	(-) 0010	(-1) 0044	(-) 0040	(O. T1-1
Calen 7	dar year (or fiscal year beginning in) Amounts from line 4	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11		*** *********************************			學一樣了一樣		
12	Gross receipts from related activities, etc	•	•			12	
13	First five years. If the Form 990 is for the organization, check this box and stop he				i, or tifth tax yo	ear as a section	n 501(c)(3)
Secti	on C. Computation of Public Suppor		<u></u>		<u> </u>	• • • • •	· · · ·
14	Public support percentage for 2012 (line 6			1. column (fl)		14	%
15 16a	Public support percentage from 2011 Sch 331/3% support test—2012. If the organic	nedule A, Part zation did not	II, line 14 . check the box	on line 13, and	 d line 14 is 33¹	15 /3% or more, ch	% neck this
	box and stop here. The organization qua	•	•	•			
	33½% support test—2011. If the organ check this box and stop here. The organ	izatıon qualıfıe	s as a publicly	supported org	ganization .		. • 🗖
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- acts-and-circu	and-circumsta Imstances" tes 	nces" test, chest. The organiz	eck this box ar atıon qualifies	nd stop here. E as a publicly su 	xplain in upported .
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part IV how the organization m supported organization	tion meets the leets the "facts	facts-and-ci -and-circums	rcumstances" tances" test. T	test, check th he organizatio	nis box and st o n qualifies as a	publicly
18	Private foundation. If the organization di						

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

	ii the organization falls to qualify	under the te	sts listed bei	ow, piease co	mpiete Part	II. <u>)</u>	
	on A. Public Support	, 	,				
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	566,444	699,813	761,411	811,938	924,023	3,763,629
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	37,730	27,709	39,667	37,705	27,373	170,184
3	Gross receipts from activities that are not an	0,,,,,	27,700	35,007	31,103	27,373	170,104
	unrelated trade or business under section 513					İ	
4	Tax revenues levied for the						
7	organization's benefit and either paid						
	to or expended on its behalf						
_	·	<u> </u>					
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	604,174	727,522	801,078	849,643	951,396	3,933,813
7a	Amounts included on lines 1, 2, and 3					!	
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified			İ			
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	Ball Same	* **	130	*** ***** **	7227	
	line 6.)						3,933,813
Secti	on B. Total Support	<u> </u>			3000		
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	604,174	727,522	801,078	849,643	951,396	
_	Gross income from interest, dividends,	004,174	121,322	801,078	645,643	951,390	3,933,813
IVa	payments received on securities loans, rents,						
	royalties and income from similar sources .						
L	·	1,032	1,047	401	233	157	2,870
В	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b	1,032	1,047	401	233	157	2,870
11	Net income from unrelated business						
	activities not included in line 10b, whether	1				1	
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)	50,343	54,160	179,240	126,009	213,022	622,774
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	655,549	782,729	980,719	975,885	1,164,575	4,559,457
14	First five years. If the Form 990 is for the	he organization	's first, secon	d, third, fourth	, or fifth tax ye	ar as a section	501(c)(3)
	organization, check this box and stop he	ere					▶ □
Secti	on C. Computation of Public Suppo	rt Percentage	B	· -			
15	Public support percentage for 2012 (line	8, column (f) di	vided by line 1	3, column (f))		15	86.3 %
16	Public support percentage from 2011 Sc					16	89.3 %
Secti	on D. Computation of Investment In						
17	Investment income percentage for 2012			y line 13, colun	nn (f))	17	.06 %
18	Investment income percentage from 201	•	• • • • • • • • • • • • • • • • • • • •			18	.07 %
19a	331/3% support tests—2012. If the organ						
- -	17 is not more than 331/3%, check this box						
b	331/3% support tests - 2011. If the organization		-			•	
	line 18 is not more than 331/2%, check this						
20	Private foundation. If the organization d		-			• •	_

	Form 990 or 990-EZ) 2012	Page
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	
Part III, line	e 12 - other income is from donated services and miscellaneous income.	
	······	
	······································	
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		•••••
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	······································	
	······································	
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•••••		

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► 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.

Name of the organization Employer identification number The C.S. Lewis Institute Inc. 54-1802015 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) . 3 Aggregate grants from (during year) . . Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure ☐ Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) 8 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: **b** Assets included in Form 990, Part X .

	Schedule	D	(Form	990)	2012
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Fan	III Organizations Maintaining Co	mections of Art, H	istorical Treasure	s, or Other Similar A	i ssets (continuea)
3	Using the organization's acquisition, acc collection items (check all that apply):	ession, and other red	cords, check any of t	he following that are a	significant use of its
a	☐ Public exhibition	d	Loan or exchar	ge programs	
b	☐ Scholarly research	е		······	
С	☐ Preservation for future generations			•••••••••••••••••••••••••••••••••••••••	••••••
4	Provide a description of the organization XIII.	's collections and exp	olain how they furthe	r the organization's exe	empt purpose in Part
5	During the year, did the organization sol assets to be sold to raise funds rather that				
Parl	IV Escrow and Custodial Arrang	ements. Complete	if the organization	answered "Yes" to F	
	line 9, or reported an amount or	n Form 990, Part X,	line 21.		
1a	Is the organization an agent, trustee, cu included on Form 990, Part X?				ot Yes No
b	If "Yes," explain the arrangement in Part	KIII and complete the	following table:		
					Amount
C	Beginning balance			1c	
d	Additions during the year			1d	
е	Distributions during the year			1e	<u> </u>
f	Ending balance			1f	
2a	Did the organization include an amount of	n Form 990, Part X, li	ne 21?		☐ Yes ☐ No
b	If "Yes," explain the arrangement in Part				
	V Endowment Funds. Complete				
			Prior year (c) Two ye		
1a	Beginning of year balance				
b	Contributions				
C	Net investment earnings, gains, and				
_	losses				
d	Grants or scholarships				
	Other expenditures for facilities and				 -
·	programs				
	Administrative expenses				
f	·				
g	End of year balance		(! 4! /	-W 5-1-1	_L
2	Provide the estimated percentage of the	current year end balai	nce (line 1g, column (a)) neid as:	
a	Board designated or quasi-endowment				
b	Permanent endowment	%			
С	remporanty restricted endowment				
0-	The percentages in lines 2a, 2b, and 2c sl		_:		L.
3a	Are there endowment funds not in the po	ssession of the orga	nization that are neic	and administered for t	
	organization by:				Yes No
	(i) unrelated organizations				3a(i)
	(ii) related organizations				3a(ii)
b	If "Yes" to 3a(ii), are the related organizati				3b
4	Describe in Part XIII the intended uses of				
Part	VI Land, Buildings, and Equipme	nt. See Form 990,	Part X, line 10.	.,.	
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	depreciation	(d) Book value
1a	Land				
b	Buildings				
С	Leasehold improvements				
d	Equipment	14,16	88	12,435	1,733
e	Other				,,,,,,
Total.	Add lines 1a through 1e. (Column (d) must	equal Form 990, Par	t X, column (B), line 1	0(c).) ▶	1,733
_					

(A) (B) (C) (C) (D) (D) (E) (F) (F) (G) (D) (D) (E) (F) (F) (G) (D) (D) (D) (E) (F) (E) (F) (E) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F	Part VII	Investments - Other Securities	. See Form 990, Part X,	line 12.	
	(i		(b) Book value		
(3) Other (A) (B) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	(1) Financia	ll derivatives			
A	(2) Closely-	held equity interests			
(G) (G) (G) (G) (G) (G) (G) (G) (G) (G)	(3) Other				
Col. Col.					-
Color Colo					 -
Col. Col.					
(G) (N) (G) (N) (G) (N) (G) (N) (G) (N) (G) (G) (N) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G					
(i) (iii) (iiii) (iii)					
Total, Column (b) must equal Form 990, Part X, col. (b) line 12.)	(G)		 		
Total_(Column (b) must equal Form 990, Part X, col. (B) line 13. Part X Ine 13.	(H)				
Part VIII Investments — Program Related. See Form 990, Part X, line 13.	(I)				
(a) Description of investment type (b) Book value (c) Method of valuation Coat or end-of-year market value (t) (2) (3) (4) (6) (6) (7) (8) (9) (10) (10) (10) (10) (10) (10) (10) (10					
(1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (10) (7) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10				r	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total, (Column (b) must equal Form 990, Part X, col. (B) line 13,) Part IX Other Assets, See Form 990, Part X, line 15. (a) Description (b) Book value (c) (d) (e) (f) (7) (8) (9) (10) Total, (Column (b) must equal Form 990, Part X, col. (B) line 15,) Part X Other Liabilities, See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (7) (8) (9) (10) Total, (Column (b) must equal Form 990, Part X, col. (B) line 15,) Part X Other Liabilities, See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (c) (d) (e) (f) (f) (f) (g) (g) (g) (g) (g) (g) (g) (h) (h) (h) (h) (h) (h) (h) (h) (h) (h		(a) Description of investment type	(b) Book value		
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	Reconciliation of Revenue per Audited Financial Stateme		
	Total revenue, gains, and other support per audited financial statements		. 1
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е			. 2e
3	Subtract line 2e from line 1		. 3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
C	Add lines 4a and 4b		. 4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		
art	XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses	per Return
1	Total expenses and losses per audited financial statements		. 1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
¢	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		. 2e
3	Subtract line 2e from line 1		. 3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С			. 4c
-	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)	5
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Schedule D (For	rm 990) 2012 F	Page 5
Part XIII	m 990) 2012 Supplemental Information (continued)	
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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 2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number

Name of the organization The C.S. Lewis Institute Inc. 54-1802015 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. 1 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.) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total employees, agents, and independent region (by type) (e.g., fundraising, program services, investments, a program service, describe specific type of service(s) in region offices in the expenditures for region d investments in region grants to recipients located in the region) contractors in region (1) London, United Kingdom 2 Program services Develop disciples who 51,529 (2) can live faith in (3) Christ (4) (5) (6) (7) (8) (9) (10) (11) (12) (13)(14)(15)(16)(17)Sub-total . . . ۲, За 51,529 Total from continuation 懋 . 2 热 ķ

sheets to Part I c Totals (add lines 3a and 3b)

51,529

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

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-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
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3 Enter total number of other organizations or entitles

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Schedule F (Form 990) 2012

Schedule F (Form 990) 2012

Page 3

Page 1

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.

(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	(h) Method of valuation (book, FMV, appraisal, other)
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						Sch	Schedule F (Form 990) 2012

Schedule I	F (Form	990)	2012

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<u>Part</u>	V 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)		✓ 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)	☐ Yes	√ 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)	☐ Yes	 ✓ No

Part V	
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, column (c) (estimated number of recipients), as applicable. Also complete this part to
	Complete this part to provide the information required by Part 1, line 2 (monitoring of iditios), Part 1, line 3, country (i)
•	(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 1, line	3 - Discipleship and mentoring costs along with administrative expenses for London office.
1.003.17.111.01	o bisopressip and mental ignores along this definition are expenses to London office.
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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

vame	or the organization					Employer identific	cation number
The C	.S. Lewis Institute Inc.					54-	1802015
Par	Francisco Antivition				vered "Yes" to F	orm 990, Part IV,	line 17.
1	Indicate whether the organization				wing activities C	heck all that apply	
	☐ Mail solicitations	m raioca rango			on of non-govern		
b	☐ Internet and email solicitatio	no	<i>4</i> [on of governmen		
		115	, L				
c	Phone solicitations		g L	」 Speciai i	undraising events	5	
d	☐ In-person solicitations						
2a	Did the organization have a writ						
	or key employees listed in Form	=	•		•	•	
b	If "Yes," list the ten highest paid compensated at least \$5,000 by			draisers) pı	ursuant to agreen	nents under which th	e fundraiser is to be
	· - -	Τ	7		1		_
	(i) Name and address of individual or entity (fundraiser)	(iii) Activity	custody o	draiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			-
1							
2							
3							
4							
5	· · · · · · · · · · · · · · · · · · ·						
6		-	-				
			ļ	ļ			
7							
8							
9							
10							
		ļ.	<u> </u>				
Fotal 3	List all states in which the orga registration or licensing.	nization is regis	stered or lic	ensed to s	olicit contribution	s or has been notifi	ed it is exempt from
	•••••						···

P	art II	Fundraising Events. Con than \$15,000 of fundraisingross receipts greater tha	ng event contributions			
•		· ·	(a) Event #1 Banquet (event type)	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))
Revenue	1	Gross receipts	58,520			58,520
_	2 3	Less: Contributions Gross income (line 1 minus line 2)	58,520			58,520
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	 			
t Expe	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses .				
Pa	10 11 rt III	Direct expense summary. Ad Net income summary. Comb Gaming. Complete if the	ine line 3, column (d), a organization answer	nd line 10		74,079) -15,559 reported more
Revenue		than \$15,000 on Form 99	90-EZ, line 6a. (a) Bıngo	(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				
Exper	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses .	00		0/	
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes% ☐ No	☐ Yes% ☐ No	
	7	Direct expense summary. Ad	ld lines 2 through 5 in c	olumn (d)		()
	8	Net gaming income summary	y. Combine line 1, colun	nn d, and line 7		
9	a Is	nter the state(s) in which the or the organization licensed to or "No," explain:		in each of these states		🗌 Yes 🗌 No
10		ere any of the organization's g	aming licenses revoked	l, suspended or termina	ated during the tax year	? . 🗌 Yes 🗌 No

Schedu	ule G (Form 990 or 990-EZ) 2012		P	age 3
11 12	Does the organization operate gaming activities with nonmembers?	_	res □	
13 a	Indicate the percentage of gaming activity operated in: The organization's facility	י ע	res 🗀	%
b 14	An outside facility			%
	Name ►			- -
	Address ▶			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		∕es 🗌	No
b c	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by 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?		∕es 🗍	No
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, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also co part to provide any additional information (see instructions).	line 2 mple	2b, te this	
				•••••
			· · · · · · · · · · · · · · · · · · ·	·

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No 1545-0047

Open To Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

The C.S. Lewis Institute Inc. 54-1802015 Part I Types of Property (c) (a) (b) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art-Works of art Art-Historical treasures . . . Art-Fractional interests . . . Books and publications . . . Clothing and household goods Cars and other vehicles . . . 7 Boats and planes 8 Intellectual property 9 Securities-Publicly traded . . 6,364 publically traded stocks 10 Securities-Closely held stock . 11 Securities - Partnership, LLC, or trust interests 12 Securities-Miscellaneous . Qualified conservation 13 contribution—Historic structures Qualified conservation contribution-Other 15 Real estate—Residential . . . Real estate-Commercial . . 16 17 Real estate - Other 18 Collectibles Food inventory 19 20 Drugs and medical supplies . . 21 Taxidermy 22 Historical artifacts 23 Scientific specimens . . . 24 Archeological artifacts . . 25 Other ► (26 Other ► (_____) 27 Other ► (_____) 28 Other ▶ (Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be 30a **b** If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any non-standard 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a b If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2012

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

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

The C S. Lewis Institute Inc.	54-1802015
Part VI, Section B, 11b - Form 990 reviewed by the Finance Committee	

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