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)

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Α	For th	ne 2011 calen	dar year, or tax	year begin	nning		, 20	11, and	ending)					
В		f applicable:	C Name of organiz		ristian	Legal S		2.5			D Employ	er Identi	fication Num	ber	
	Ad	ldress change	Doing Business				•				36-6	51010	090		
	Na	ime change	Number and stre	100	x if mail is not del	livered to street	addr)		Room/s	uile	E Telepho				
		tial return	8001 Brade	lock Ro	ad				302		(70	3) 64	42-107)	
		rminated	City, town or cou				Sta	ate ZIP	code + 4		1,703	7. 0	12 10 /		
	\vdash	nended return	Springfie]	ď			V		151		G 05000 55	aninin (\$1,364,	102	
		plication pending	F Name and addre		officer		v	A 22		H(a) Is this a	a group return			Yes	X No
	L 1	processors and the second	Peter F. Rathbu			02 Cowin	~fiold:	מא מוז			affiliales inclu		-	Yes	No
1	Tay	exempt status	X 501(c)(3)	501(c) (131		altach a list, (s		ictions)	1 100	
1	-) - ()	nsert no.)	4947(a)(1	or	527						
1			w.clsnet.o	7	1						exemption nur				
K		of organization:	X Corporation	Trust	Association	Other >		L Year o	f Formation	on: 1961	1 Ms	tate of le	gal domicile:	VA	
Pa	ert I	Summar													
	1	Briefly describ	e the organizatio	n's missio	n or most sig	nificant activ	rities:	See A	Attac	hment					
ce	39														
Activities & Governance															
Ver	, .	Charlethia has													
ဗိ	ı	Check this box	ing members of t		discontinue							_ 1			2.2
ಳ			ependent voting									3		_	23
ties	5	Total number	of individuals em	ploved in a	alendar vear	: 2011 (Part	V line 2a)	<i>D</i>)				5			13
τį	6	Total number	of volunteers (es	timate if ne	ecessary)							6			0
A			d business reven									7 a			0.
			business taxable									7 b			
											rior Year		Curre	nt Ye	ar
4)	8	Contributions	and grants (Part	VIII, line 1	h)						,523,3	71.			911.
Revenue	9	Program servi	ce revenue (Part	VIII, line 2	g)						171,3				843.
eve.	10	Investment inc	come (Part VIII, c	olumn (A),	lines 3, 4, ar	nd 7d)						71.			
ď	11 (Other revenue	(Part VIII, colum	ın (A), line	s 5, 6d, 8c, 9	c, 10c, and	11e)				84,3	88.		22,	348.
			 add lines 8 th 								.,779,3	38.	1,	364,	102.
	13	Grants and sir	nilar amounts pa	id (Part IX,	column (A),	lines 1-3) .									
	14	Benefits paid t	o or for members	s (Part IX,	column (A), l	ine 4)									
ν,	15	Salaries, other	compensation,	employee	benefits (Par	t IX, column	(A), lines 5	-10) .			775,1	57.		709,	370.
ses	16a	Professional fu	undraising fees (F	Part IX, co	umn (A), line	11e)	* * * * * *		e roscy						- 2
Expenses			ng expenses (Pa							Day of the	FILE			J. Oak	
Ш										-	FF4 0	0.0		C 2 F	
			es (Part IX, colum								574,2				762.
			s. Add lines 13-1								.,349,3		1,		132.
+ 2	19	Revenue less	expenses. Subtr	act line 18	from line 12						429,9				970.
siances	20	Total assets /F	2ad V 1: 40\							Beginnin	ng of Curren			of Yea	
Bail			Part X, line 16) . (Part X, line 26)								266,0				744.
Not Am											256,3				150.
	22 1		und balances. S	ubtract line	21 from line	20					9,7	16.		43,	594.
	rt II	Signature													
Unde	r penaltie lete. Dec	es of perjury, I declaration of prepare	are that I have examin tother than officer) is	ed this return,	including accom	panying schedu	les and stateme	ents, and t	o the bes	l of my know	ledge and beli	ief, il is lr	ue, correct, a	nd	
		1	U. I	lath	1		,				-1-1-	Transport Ass			
C:-		Signature	e of officer	Luna	¥				_		1/6/2	10/2		_	
Sig	n									Ua	ne -				
1161	C		er F. Rathb print name and title.	oun						Presi	ident				
_					Ta .							1			
			aparer's name		Preparer's sign	nature		Date	9		Check X	if	PTIN		
Pai			J. Morrow								self-employe	d	P01279	326	
	pare		► MORROW												
US	e Onl	y Firm's addres	s 8665 S	UDLEY 1	RD # 230)					Firm's EIN	▶ 20-	-46212	55	
			MANASS					110-4			Phone no.	(571	L) 331-	034	3
May	the IR	S discuss this	return with the p	reparer sh	own above?	(see instruc	tions)	men a	A 454 W	91 45 T A B	1 40000X 10 40	2004 (4)	. X Yes		No

Form 990 (2011) Christian Legal Society Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	ls the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
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		Х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
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		Х
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		Х
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.			
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	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? <i>If 'Yes,' complete Schedule D, Part VII</i>	11 b		Х
	c 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	11 c		Х
	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	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
	f 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	11 f		Х
12	2a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	Х	
	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			Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E			Х
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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? <i>If 'Yes,' complete Schedule F, Parts I and IV</i>	14b		X
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		Х
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		Х
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		Х
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		Х
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		Х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2011) Christian Legal Society Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
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		Х
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? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	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, and 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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
لد.	any tax-exempt bonds?	24c 24d		
	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	240		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
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		Х
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		Х
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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	Х	
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
C	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	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		Х
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	Х	
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		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	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		Х
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		Х
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

BAA Form **990** (2011)

14 b

Page 5 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 0 1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 a **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c (gambling) winnings to prize winners? 2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . 2 b Х Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?..... Х 3 a **b** If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O...... 3 b 4 a 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)? 4 a Х **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. 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?..... Χ **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . Х 5 b 5 c 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Х 6 a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were 6 b Organizations that may receive deductible contributions under section 170(c). a 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?.................. 7 a Х **b** If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7 c 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? 7 e Х 7 f Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?... g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7 h 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 organization, have excess business 8 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9 a **b** Did the organization make a distribution to a donor, donor advisor, or related person? . . . 9 b 10 Section 501(c)(7) organizations. Enter: a 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 11 Section 501(c)(12) organizations. Enter: b Gross income from other sources (Do not net amounts due or paid to other sources 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year | 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13 a 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 14a Did the organization receive any payments for indoor tanning services during the tax year? Х

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

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI

	Check if Schedule O contains a response to any question in this Part VI			. X
Sec	tion A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
k	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		X
2	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents			.,
_	since the prior Form 990 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u>X</u>
6	Did the organization have members or stockholders?	6		X
7 8	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?	7 a		Х
ŀ	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8 a	Х	
t	Each committee with authority to act on behalf of the governing body?	8 b	Х	
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		х
Sec	etion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	The couldn't require marmalian about pointed not required by the marmar revenue court,		Yes	No
10:	Did the organization have local chapters, branches, or affiliates?	10 a	X	-110
	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their	104	71	
	operations are consistent with the organization's exempt purposes?	10 b	Х	
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	- 1		
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Х	
	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12 c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
á	The organization's CEO, Executive Director, or top management official	15 a	Х	
	Other officers of key employees of the organization	15 b	Х	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		Х
ŀ	of 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 taken steps to safeguard the	100		
	organization's exempt status with respect to such arrangements?	16 b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed See Form 990, Page 6, Line 17 (continued)			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available inspection. Indicate how you make these available. Check all that apply. X Own website X Upon request X Upon request	for pu	blic	
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements availab the public during the tax year.	le to		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization			
ı	Peter Rathbun 8001 Braddock Rd. St 302 Springfield VA 22151 (70	03) 6	42 <u>-</u> 1	L070

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

- 1 a 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 rela	ated or	rgan	izati	on c	ompe	nsat	ed any current officer,	director, or trustee.	
				(C	;)					
(A) Name and title	(B) Average hours per week		ot che ss per and a	Posi ck mo son is direc	tion re that both tor/tru	an one b an offic ustee)	ox, er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	(describe hours for related organiza- tions in Schedule O)	andividual forstee or director	anstitutional trustee	Officer	e sekolduse key	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Peter F. Rathbun										
President/Chairman	0.00	X		X				0.	0.	0.
(2) Delia Bouwers Bianchin										
Director	0.00	X						0.	0.	0.
(3) Roger G. Brooks										
Director	0.00	X						0.	0.	0.
_(4)_Jon_D. Campbell										
Director	0.00	X						0.	0.	0.
_(5)_Carl_HEsbeck										
Director	0.00	Х						0.	0.	0.
(6) Case Hoogendoorn										
Director	0.00	X						0.	0.	0.
_(7)_J. Tyler_Makepeace										
Director	0.00	X						0.	0.	0.
_(8)_John_WMauck										
Director	0.00	X						0.	0.	0.
_(9)_Wendy_LHill										
Director	0.00	Х						0.	0.	0.
(10) Steven T. O'Ban										
Director	0.00	Х						0.	0.	0.
(11) Jennifer K. Patrick										
Director	0.00	Х						0.	0.	0.
(12) James W. Richardson										
Director	0.00	Х						0.	0.	0.
(13) Joseph Ruta										
Director	0.00	X						0.	0.	0.
(14) H. Robert Showers										
Director	0.00	X						0.	0.	0.

					(C Posi								
	(A) Name and title	(B) Average	(do	not c	heck	more	than c	ne an	(D) Reportable	(E) Reportable		(F) imated	
	Name and title	hours per	offi	cer ar	nd a d	irecto	r/trust	ee)	compensation from the organization	compensation from related organizations	amour	nt of other ensation	
		week (describ	Individual or director	Instit	Officer	Key	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	orga	m the nization	
		e hours	Individual or directo	utior	er	Key employee	est c oyee	ler				related nizations	
		for related	r trustee	nal tr		loyee	omp						
		organi- zations	stee	Institutional trustee		(6)	ensa						
		Sch O)		Ф			ted						
(15)	William D Treeby												
		0.00	Х						0.	0.			0.
<u>(16)</u>	Sally Wagenmaker												
		0.00	Х						0.	0.			0.
<u>(17)</u>	Christopher S. Williams									•			•
		0.00	X						0.	0.			0.
<u>(18)</u>	Everardo Zavala									•			^
(40)		0.00	Х						0.	0.			0.
<u>(19)</u>	Stephen A. Tuggy	h 00	37		77				0	0			^
(20)	President - Elect Frederick W Claybrook, Jr.	0.00	Х		Х				0.	0.			0.
(20)		0.00	Х		Х				0.	0.			0.
(21)	Wallace L. Larson	0.00	Λ		Λ				0.	<u> </u>			<u> </u>
<u>\^_'</u>)_		0.00	Х		Х				0.	0.			0.
(22)	Fred Potter	0.00	21		21				0.	•			<u>••</u>
7/	CEO	40.00	х		Х		Х		116,765.	0.			0.
(23)	Craig Shultz								,				
	President - Past	0.00	Х		Х				0.	0.			0.
(24)	Kimberlee Colby												
	Key Employee	40.00				Х			102,136.	0.			0.
<u>(25)</u>													
1 b	Sub-total	<u></u>	l	<u> </u>		<u> </u>		•	218,901.	0.			0.
c	Total from continuation sheets to Part VII, Section	Α						•	,				
d	Total (add lines 1b and 1c)							•	218,901.	0.			0.
2	Total number of individuals (including but not limited to	those I	isted	abo	ove)	who	rece	eived	d more than \$100,0	00 of reportable cor	npensatio	on	
	from the organization \blacktriangleright 2												
												Yes I	<u>No</u>
3	Did the organization list any former officer, director or	trustee,	key	emp	oloye	ee, c	r hig	hest	t compensated emp	oloyee			
	on line 1a? If 'Yes,' complete Schedule J for such indiv	idual		• •	• •	٠.	• •	• •			. 3		<u>X</u>
4	For any individual listed on line 1a, is the sum of report	able co	mpe	nsat	ion a	and	othe	r cor	mpensation from				
	the organization and related organizations greater than such individual										. 4		Х
5	Did any person listed on line 1a receive or accrue com	pensati	on fr	om a	any ı	unre	lated	dorg	anization or individ	ual	_		
Sec	for services rendered to the organization? If 'Yes,' com tion B. Independent Contractors	plete S	chec	lule	J for	suc	n pe	rson	1		. 5		X
1	Complete this table for your five highest compensated	indeper	nden	t co	ntrac	ctors	that	rece	eived more than \$1	00,000 of	۰		
	compensation from the organization. Report compensation	ition for	tne	cale	naai	r yea	ar en	aing		<u> </u>			
	(A) Name and business address	;							(B) Description of	of services	(C) Comper) Isation	
									•		•		
2	Total number of independent contractors (including but	not lim	ited	to th	ose	liste	d ab	ove)) who received mor	e than			
	\$100,000 in compensation from the organization ►												

Pa	rt VIII Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns	1 112 011			
	h Total. Add lines 1a-1f	1,112,911.			
PROGRAM SERVICE REVENUE	2a Conference Registrations b c d	228,843.	228,843.	0.	0.
ΑM	e				
30GF	f All other program service revenue	222 242			
4	g Total. Add lines 2a-2f	228,843.			
	 Investment income (including dividends, interest and other similar amounts)				
	6 a Gross rents b Less: rental expenses . c Rental income of (loss)				
	d Net rental income or (loss)				
	b Less: cost or other basis and sales expenses c Gain or (loss)				
	d Net gain or (loss)				
ÆNUE	8 a Gross income from fundraising events (not including. \$ of contributions reported on line 1c).				
OTHER REVEN	See Part IV, line 18				
HE	b Less: direct expenses b				
5	c Net income or (loss) from fundraising events				
	9 a Gross income from gaming activities. See Part IV, line 19 a				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities ▶				
	10 a Gross sales of inventory, less returns and allowances				
	b Less: cost of goods sold b				
	c Net income or (loss) from sales of inventory ► Miscellaneous Revenue Business Code				
	11a Reimbursed Expenses 900099 b	22,348.	22,348.	0.	0.
	С				
	d All other revenue	_			
	e Total. Add lines 11a-11d	22,348.			
	12 Total revenue. See instructions		251,191.	0.	0.

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a re		. , , , , ,	. ,	
Do i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV. line 21		охроносо	gonoral expenses	СХРОПОС
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3					
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	218,901.	182,520.	14,841.	21,540.
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	357,269.	290,348.	9,381.	57,540.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b)	10.060	6 650	4 212	
	employer contributions)	10,962.	6,652.	4,310.	0.
9	Other employee benefits	79,922.	66,636.	5,420.	7,866.
10	Payroll taxes	42,316.	23,351.	15,686.	3,279.
11					
	a Management				
ı	Legal				
	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
-	g Other	115,917.	95,123.	0.	20,794.
13	Office expenses	32,942.	12,495.	1,869.	18,578.
14	Information technology	14,802.	12,300.	1,050.	1,452.
15	Royalties	14,002.	12,300.	1,050.	1,452.
16	Occupancy	48,334.	40,299.	3,278.	4,757.
17	Travel		38,049.	9,552.	3,132.
18		30,7333	30,013	3,7552.1	5,152.
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	33,659.	28,065.	2,282.	3,312.
23	Insurance				
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.)				
á	Chapter/Member Support	240,999.	240,999.	0.	0.
ŀ	Employee Related Expenses	2,889.	114.	1,835.	940.
(CLRF Advocacy Expenses	15,795.	15,795.	0.	0.
(Caging & DB Mgmt Support	17,903.	14,927.	1,214.	1,762.
	All other expenses	61,789.	52,462.	20,524.	-11,197.
25	Total functional expenses . Add lines 1 through 24e	1,345,132.	1,120,135.	91,242.	133,755.
26	the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
	Check here ► X if following				•
	SOP 98-2 (ASC 958-720)	0.	0.	0.	0.

Га	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing		1	
	2	Savings and temporary cash investments		2	50,504.
	3	Pledges and grants receivable, net		3	119,474.
	4	Accounts receivable, net		4	12,918.
	5	Receivables from current and former officers, directors, trustees, key employees,			
		and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions).		6	
A	7	Notes and loans receivable, net		7	
A S E T	8	Inventories for sale or use		8	7,251.
TS	9	Prepaid expenses and deferred charges		9	26,550.
5			8,030.	9	20,330.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	h	Less: accumulated depreciation		10 c	107,400.
	11	Investments — publicly traded securities	•	11	20,71000
	12	Investments — other securities. See Part IV, line 11		12	1,830.
	13	Investments – program-related. See Part IV, line 11	· ·	13	270000
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	7,817.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	333,744.
	17	Accounts payable and accrued expenses		17	66,699.
	18	Grants payable	•	18	•
	19	Deferred revenue	130,809.	19	123,251.
Ļ	20	Tax-exempt bond liabilities		20	
Ā	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
A B I L I T	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
- 1	23	Secured mortgages and notes payable to unrelated third parties		23	
E S	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	76,666.	25	100,200.
	26	Total liabilities. Add lines 17 through 25	256,310.	26	290,150.
P E		Organizations that follow SFAS 117, check here ► X and complete lines			
		27 through 29 and lines 33 and 34.			
ASSETS	27	Unrestricted net assets	2,216.	27	38,594.
Ě	28	Temporarily restricted net assets	7,500.	28	5,000.
	29	Permanently restricted net assets		29	
P		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete			
F UND		lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
B A	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
A	32	Retained earnings, endowment, accumulated income, or other funds		32	
BALANCES	33	Total net assets or fund balances	-	33	43,594.
S	34	Total liabilities and net assets/fund balances	266,026.	34	333,744.

BAA Form **990** (2011)

Form	n 990 (2011) Christian Legal Society 36-	6101090		Pa	age 12
Par	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				. X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,3	64,1	.02.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,3	45 , 1	.32.
3	Revenue less expenses. Subtract line 2 from line 1	3		18,9	70.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		9,7	16.
5	Other changes in net assets or fund balances (explain in Schedule O)	5		14,9	08.
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		43 , 5	94.
Par	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990:				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 a	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		Х
k	Were the organization's financial statements audited by an independent accountant?		2 b	Х	
c	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud review, or compilation of its financial statements and selection of an independent accountant?		2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
c	If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:	ı			
	Separate basis X Consolidated basis Both consolidated and separate basis				

BAA Form **990** (2011)

Х

3 <u>a</u>

3 b

3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

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.

4947(a)(1) nonexempt charitable trust.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Christian Legal Society 36-6101090 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 7 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts 9 X from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after the section 510 tax activities related to the section 510 tax acceptance from the section 510 tax a June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that 11 describes the type of supporting organization and complete lines 11e through 11h. а Type II С Type III - Functionally integrated d Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) 11 g (i) 11 g (ii) 11 g (iii) Provide the following information about the supported organization(s h (iii) Type of organization (described on lines 1-9 above or IRC section (v) Did you notify the organization in column (i) of (vi) Is the organization in column (i) (i) Name of supported organization (ii) EIN (iv) Is the (vii) Amount of support organization in column (i) listed in your governing document? organized in the (see instructions)) your support? No Yes No Yes (A) (B) (C) (D) (E)

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(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.)

Sec	tion A. Public Support						
	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 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						
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10 · · · · · · · · · · ·						
12	Gross receipts from related activit	ies, etc (see instru	ctions)			12	
13	First five years. If the Form 990 is organization, check this box and s	s for the organization	on's first, second,	third, fourth, or fifth	tax year as a sec	tion 501(c)(3)	▶ □
Sec	tion C. Computation of Pu						
14	Public support percentage for 201						%
15	Public support percentage from 20	010 Schedule A, Pa	art II, line 14			15	%
16 a	33-1/3% support test $-$ 2011. If t and stop here. The organization of	he organization did qualifies as a public	d not check the book cly supported orga	on line 13, and th	e line 14 is 33-1/3	% or more, check t	his box ▶ □
b	33-1/3% support test — 2010. If the and stop here. The organization of						
17 a	10%-facts-and-circumstances te or more, and if the organization m the organization meets the 'facts-a	eets the 'facts-and	-circumstances' te:	st, check this box a	and stop here. Exp	olain in Part IV how	
b	10%-facts-and-circumstances to or more, and if the organization m organization meets the 'facts-and-	eets the 'facts-and	-circumstances' te:	st, check this box a	and stop here . Exp	olain in Part IV how	the
18	Private foundation. If the organiz	ation did not check	a box on line 13,	16a, 16b, 17a, or	17b, check this box	x and see instructio	ns ▶

BAA

Schedule A (Form 990 or 990-EZ) 2011

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.)

Sec	tion A. Public Support						
		(-) 0007	(h) 0000	(=) 0000	(4) 0040	(=) 0044	(f) Tatal
Calen 1	dar year (or fiscal yr beginning in) ► Gifts, grants, contributions and membership fees	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	received. (Do not include any 'unusual grants.')	1,728,643.	1,337,961.	1,324,023.	1,523,371.	1,119,211.	7,033,209.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's						
3	tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 .						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	1,728,643.	1,337,961.	1,324,023.	1,523,371.	1,119,211.	7,033,209.
	Amounts included on lines 1, 2, and 3 received from disqualified persons	27.2070.200			2,020,0.20		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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						
c	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						7,033,209.
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
			. ,				
9 10 a	Amounts from line 6		(b) 2008 1,337,961. 48,979.	1,324,023.		(e) 2011 1,119,211.	(f) Total 7,033,209. 179,011.
9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	1,728,643. 54,348.	1,337,961. 48,979.	75,413.	271.	0.	7,033,209.
9 10 a b	Amounts from line 6	1,728,643.	1,337,961.	1,324,023.	1,523,371.	1,119,211.	7,033,209.
9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	1,728,643. 54,348.	1,337,961. 48,979.	75,413.	271.	0.	7,033,209.
9 10 a b c 11	Amounts from line 6	1,728,643. 54,348. 54,348.	1,337,961. 48,979. 48,979.	1,324,023. 75,413. 75,413.	271. 271. 171,308.	0.	7,033,209. 179,011. 179,011.
9 10 a b c 11	Amounts from line 6	1,728,643. 54,348. 54,348. 472,421. 2,255,412.	48,979. 48,979. 48,979. 683,385. 2,070,325.	1,324,023. 75,413. 75,413. 192,207. 1,591,643.	271. 271. 271. 171,308. 1,694,950.	0. 0. 228,843. 1,348,054.	7,033,209. 179,011. 179,011. 1,748,164. 8,960,384.
9 10 a b c 11 12	Amounts from line 6	1,728,643. 54,348. 54,348. 472,421. 2,255,412. s for the organization here	48,979. 48,979. 48,979. 683,385. 2,070,325. on's first, second, 1	1,324,023. 75,413. 75,413. 192,207. 1,591,643.	271. 271. 271. 171,308. 1,694,950.	0. 0. 228,843. 1,348,054.	7,033,209. 179,011. 179,011. 1,748,164. 8,960,384.
9 10 a b c 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and stition C. Computation of Pu	1,728,643. 54,348. 54,348. 472,421. 2,255,412. s for the organization here	48,979. 48,979. 48,979. 683,385. 2,070,325. on's first, second, sec	1,324,023. 75,413. 75,413. 192,207. 1,591,643. third, fourth, or fifth	271. 271. 271. 171,308. 1,694,950. tax year as a section.	0. 0. 228,843. 1,348,054. tion 501(c)(3)	7,033,209. 179,011. 179,011. 1,748,164. 8,960,384▶□
9 10 a b c 11 12	Amounts from line 6	1,728,643. 54,348. 54,348. 472,421. 2,255,412. s for the organization here	48,979. 48,979. 48,979. 48,979. 683,385. 2,070,325. on's first, second, to the second of the sec	1,324,023. 75,413. 75,413. 192,207. 1,591,643. third, fourth, or fifth	271. 271. 171,308. 1,694,950. tax year as a section.	0. 0. 228,843. 1,348,054. tion 501(c)(3)	7,033,209. 179,011. 179,011. 1,748,164. 8,960,384
9 10 a b 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and stion C. Computation of Pu Public support percentage from 20	1,728,643. 54,348. 54,348. 54,348. 472,421. 2,255,412. s for the organization here	48,979. 48,979. 48,979. 48,979. 683,385. 2,070,325. on's first, second, second, second age) divided by line 13 art III, line 15	1,324,023. 75,413. 75,413. 192,207. 1,591,643. third, fourth, or fifth	271. 271. 171,308. 1,694,950. tax year as a section.	0. 0. 228,843. 1,348,054. tion 501(c)(3)	7,033,209. 179,011. 179,011. 1,748,164. 8,960,384▶□
9 10 a b 11 12 13 14 Sec 15 16	Amounts from line 6	1,728,643. 54,348. 54,348. 54,348. 472,421. 2,255,412. s for the organization here	48,979. 48,979. 48,979. 48,979. 683,385. 2,070,325. on's first, second, second, second age) divided by line 13 art III, line 15	1,324,023. 75,413. 75,413. 192,207. 1,591,643. third, fourth, or fifth	271. 271. 171,308. 1,694,950. tax year as a section.	0. 0. 228,843. 1,348,054. tion 501(c)(3)	7,033,209. 179,011. 179,011. 1,748,164. 8,960,384
9 10 a b 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and stion C. Computation of Pu Public support percentage from 20	1,728,643. 54,348. 54,348. 472,421. 2,255,412. s for the organization here	48,979. 48,979. 48,979. 48,979. 683,385. 2,070,325. con's first, second, second se	1,324,023. 75,413. 75,413. 192,207. 1,591,643. third, fourth, or fifth	271. 271. 171,308. 1,694,950. tax year as a sect	0. 0. 228,843. 1,348,054. tion 501(c)(3)	7,033,209. 179,011. 179,011. 1,748,164. 8,960,384
9 10 a b 11 12 13 14 Sec 15 16 Sec	Amounts from line 6	1,728,643. 54,348. 54,348. 54,348. 472,421. 2,255,412. s for the organization here	48,979. 48,979. 48,979. 48,979. 683,385. 2,070,325. on's first, second, second sec	1,324,023. 75,413. 75,413. 192,207. 1,591,643. third, fourth, or fifth	1,523,371. 271. 271. 171,308. 1,694,950. tax year as a sector.	228,843. 1,348,054. tion 501(c)(3)	7,033,209. 179,011. 179,011. 1,748,164. 8,960,384
9 10 a b 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Amounts from line 6	1,728,643. 54,348. 54,348. 54,348. 54,348. 472,421. 2,255,412. s for the organization here	48,979. 48,979. 48,979. 48,979. 48,979. 683,385. 2,070,325. on's first, second, second s	1,324,023. 75,413. 75,413. 75,413. 192,207. 1,591,643. third, fourth, or fifth	1,523,371. 271. 271. 171,308. 1,694,950. 1 tax year as a sector	228,843. 1,348,054. tion 501(c)(3)	7,033,209. 179,011. 179,011. 1,748,164. 8,960,384
9 10 a b 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Amounts from line 6	1,728,643. 54,348. 54,348. 54,348. 54,348. 472,421. 2,255,412. s for the organization here	48,979. 48,979. 48,979. 48,979. 48,979. 683,385. 2,070,325. on's first, second, second s	1,324,023. 75,413. 75,413. 75,413. 192,207. 1,591,643. third, fourth, or fifth	1,523,371. 271. 271. 171,308. 1,694,950. Itax year as a sectors as a sector as a se	1,119,211. 0. 0. 228,843. 1,348,054. tion 501(c)(3)	7,033,209. 179,011. 179,011. 1,748,164. 8,960,384

SCHEDULE D (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2011

Open to Public Inspection

Employer identification number

Chi	ristian Legal Society	36-6101090
Pa		
	the organization answered 'Yes' to Form 990, Part IV, line 6.	•
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor act funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any of purpose conferring impermissible private benefit?	her — —
Da	rt II Conservation Easements. Complete if the organization answered 'Yes' to	
	Purpose(s) of conservation easements held by the organization (check all that apply).	Tomi 990, Fartiv, line 7.
•		an historically important land area
		a certified historic structure
	Preservation of open space	a certified filstofic structure
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the follast day of the tax year.	m of a conservation easement on the
		Held at the End of the Tax Year
;	a Total number of conservation easements	. 2a
	b Total acreage restricted by conservation easements	. 2b
	Number of conservation easements on a certified historic structure included in (a)	
	d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	. 2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by tax year ►	the organization during the
4	Number of states where property subject to conservation easement is located ►	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling and enforcement of the conservation easements it holds?	of violations, Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements	during the year
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements duri ▶ \$	ng the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(ii)?$	Yes No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and experincled, if applicable, the text of the footnote to the organization's financial statements that describe conservation easements.	nse statement, and balance sheet, and is the organization's accounting for
Pa	Organizations Maintaining Collections of Art, Historical Treasures, or Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.	Other Similar Assets.
1 :	a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue sta art, historical treasures, or other similar assets held for public exhibition, education, or research in f in Part XIV, the text of the footnote to its financial statements that describes these items.	atement and balance sheet works of urtherance of public service, provide,
l	b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statem historical treasures, or other similar assets held for public exhibition, education, or research in furth following amounts relating to these items:	nent and balance sheet works of art, erance of public service, provide the
	(i) Revenues included in Form 990, Part VIII, line 1	
	(ii) Assets included in Form 990, Part X	> \$
	If the organization received or held works of art, historical treasures, or other similar assets for finar amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	ncial gain, provide the following
	a Revenues included in Form 990, Part VIII, line 1	
	b Assets included in Form 990, Part X	▶\$

Part III Organizations Maintainii	ng Collectio	ns of Art, Histo	orical Treasures, o	r Other Similar Ass	sets (c	<u>:ontinu</u>	ed)	
3 Using the organization's acquisition, ac items (check all that apply):	ccession, and ot	her records, check	any of the following that	are a significant use of it	s collect	ion		
a Public exhibition		d Loan	or exchange programs					
b Scholarly research		e Other						
c Preservation for future generations	S	<u>—</u>						
4 Provide a description of the organization Part XIV.	on's collections	and explain how the	ey further the organizatio	n's exempt purpose in				
5 During the year, did the organization s assets to be sold to raise funds rather	than to be main	tained as part of the	e organization's collection	n?	Yes		No	
Part IV Escrow and Custodial A line 9, or reported an amo				wered 'Yes' to Form	990, F	² art IV	,	
1 a Is the organization an agent, trustee, c included on Form 990, Part X?				sets not	Yes	. [No	
b If 'Yes,' explain the arrangement in Pa	rt XIV and comp	lete the following ta	able:	Г				
					Amoun	t		
c Beginning balance								
d Additions during the year								
e Distributions during the year								
f Ending balance								
2 a Did the organization include an amoun		Part X, line 21? .			Yes	L	No	
b If 'Yes,' explain the arrangement in Pa								
Part V Endowment Funds. Comp	olete if the or	ganization ansv	vered 'Yes' to Form)			
	(a) Current year	(b) Prior year	(c) Two years bac	k (d) Three years back	(e) F	Four years	s back	
1 a Beginning of year balance								
b Contributions								
c Net investment earnings, gains, and losses								
d Grants or scholarships								
e Other expenditures for facilities and programs								
f Administrative expenses								
g End of year balance								
2 Provide the estimated percentage of the	ne current year e	end balance (line 1g	g, column (a)) held as:					
a Board designated or quasi-endowmen	t ►	%						
b Permanent endowment	%							
c Temporarily restricted endowment		8						
The percentages in lines 2a, 2b, and 2	c should equal	100%.						
3 a Are there endowment funds not in the	nossassion of th	o organization that	are held and administer	ad for the				
organization by:	p033C33I0I1 01 ti	ic organization that	are field and administer	cu for the		Yes	No	
(i) unrelated organizations					. 3a(i)			
(ii) related organizations					. 3a(ii)			
b If 'Yes' to 3a(ii), are the related organize								
4 Describe in Part XIV the intended uses	s of the organiza	tion's endowment f	unds.					
Part VI Land, Buildings, and Equ								
Description of property	•	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d)	Book va	.lue	
1 a Land			<u> </u>		-		-	
b Buildings								
c Leasehold improvements			28,296.	13,084.		15,	,212.	
d Equipment			198,859.	131,019.			,840.	
e Other								
Total. Add lines 1a through 1e. (Column (d)	•	m 990, Part X. colu	•				,400.	
BAA		,,,	1 // (-/-/	•	dule D (l			
					•		-	

Part VII Investments - Other Securities. See	Form 990, Part X, li	ne 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
<u>(A)</u>		
(B)		
(C)	-	
(D)		
(E)		
(F) (G)	-	
(H)		
(I)		
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.) >		
Part VIII Investments - Program Related. See		ne 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		·
(2)		
(3)		
(4)		
(5)		
(6)		
(8)		
(9)		
(10) Tatal (Column /h) must squal Form 000, Part V, column /R) line 12)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ▶ Part IX Other Assets. See Form 990, Part X, li	ne 15	
<u>'</u>	escription	(h) Dealership
		I (D) Book value
		(b) Book value
(1)		(b) Book value
		(b) Book value
(1) (2)		(b) Book value
(1) (2) (3)		(b) Book value
(1) (2) (3) (4)		(b) Book value
(1) (2) (3) (4) (5) (6) (7)		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8)		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9)		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B),	line 15.)	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), Part X Other Liabilities. See Form 990, Part X	line 15.)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), Part X Other Liabilities. See Form 990, Part X (a) Description of liability	line 15.)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), Part X Other Liabilities. See Form 990, Part > (a) Description of liability (1) Federal income taxes	line 15.)	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), Part X Other Liabilities. See Form 990, Part X (a) Description of liability (1) Federal income taxes (2) Line of Credit	line 15.)	0.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), Part X Other Liabilities. See Form 990, Part X (a) Description of liability (1) Federal income taxes (2) Line of Credit (3) Subtenant Security Deposit	line 15.)	0.88.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), Part X Other Liabilities. See Form 990, Part X (a) Description of liability (1) Federal income taxes (2) Line of Credit (3) Subtenant Security Deposit (4) Payroll	line 15.)	0. 8. 9.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), Part X Other Liabilities. See Form 990, Part > (a) Description of liability (1) Federal income taxes (2) Line of Credit (3) Subtenant Security Deposit (4) Payroll (5) Credit Card Payable	line 15.)	0. 8. 9.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), Part X Other Liabilities. See Form 990, Part X (a) Description of liability (1) Federal income taxes (2) Line of Credit (3) Subtenant Security Deposit (4) Payroll (5) Credit Card Payable (6)	line 15.)	0. 8. 9.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), Part X Other Liabilities. See Form 990, Part X (a) Description of liability (1) Federal income taxes (2) Line of Credit (3) Subtenant Security Deposit (4) Payroll (5) Credit Card Payable (6) (7)	line 15.)	0. 8. 9.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), Part X Other Liabilities. See Form 990, Part X (a) Description of liability (1) Federal income taxes (2) Line of Credit (3) Subtenant Security Deposit (4) Payroll (5) Credit Card Payable (6) (7) (8)	line 15.)	0. 8. 9.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), Part X Other Liabilities. See Form 990, Part X (a) Description of liability (1) Federal income taxes (2) Line of Credit (3) Subtenant Security Deposit (4) Payroll (5) Credit Card Payable (6) (7) (8) (9)	line 15.)	0. 8. 9.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), Part X Other Liabilities. See Form 990, Part X (a) Description of liability (1) Federal income taxes (2) Line of Credit (3) Subtenant Security Deposit (4) Payroll (5) Credit Card Payable (6) (7) (8) (9) (10)	line 15.)	0. 8. 9.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), Part X Other Liabilities. See Form 990, Part X (a) Description of liability (1) Federal income taxes (2) Line of Credit (3) Subtenant Security Deposit (4) Payroll (5) Credit Card Payable (6) (7) (8) (9)	line 15.)	0. 8. 9. 3.

2 FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Par	t XI	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1	Total	revenue (Form 990, Part VIII, column (A), line 12)		1,364,102.
2	Total	expenses (Form 990, Part IX, column (A), line 25)		1,345,132.
3		ss or (deficit) for the year. Subtract line 2 from line 1		18,970.
4		inrealized gains (losses) on investments		
5		ated services and use of facilities		
6		stment expenses		
7		period adjustments		
8		r (Describe in Part XIV.)		
9		adjustments (net). Add lines 4 through 8		
10		ss or (deficit) for the year per audited financial statements. Combine lines 3 and 9		18 , 970.
Par		Reconciliation of Revenue per Audited Financial Statements With Revenue per Re		
1		revenue, gains, and other support per audited financial statements	1	1,370,402.
2		unts included on line 1 but not on Form 990, Part VIII, line 12:		
		inrealized gains on investments		
		tted services and use of facilities		
		veries of prior year grants		
		r (Describe in Part XIV.)		
e		ines 2a through 2d	2 e	6,300.
3		ract line 2e from line 1	3	1,364,102.
4		unts included on Form 990, Part VIII, line 12, but not on line 1:		
		stment expenses not included on Form 990, Part VIII, line 7b		
		r (Describe in Part XIV.)	_	
		ines 4a and 4b	4 c	1 064 100
		revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,364,102.
		Reconciliation of Expenses per Audited Financial Statements With Expenses per		1 226 524
1		expenses and losses per audited financial statements	1	1,336,524.
2		unts included on line 1 but not on Form 990, Part IX, line 25: Itted services and use of facilities		
		· · · · · · · · · · · · · · · · · · ·		
		r losses		
		ines 2a through 2d	2.0	
_		ract line 2e from line 1	2 e	1,336,524.
3		unts included on Form 990, Part IX, line 25, but not on line 1:	3	1,330,324.
4		streent expenses not included on Form 990, Part VIII, line 7b 4a		
		r (Describe in Part XIV.)		
		ines 4a and 4b	4 c	8,608.
		expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,345,132.
Par	t XIV	Supplemental Information		
Com Part any a	plete t V, line additio	his part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part nal information.	and 2b; to provide	
Pt_	XII	I Line 4b Book to tax differences in depreciation.		
Pt_	XII	Line 2dBook_to_tax_differences_in_donated_facilities		

Schedule D (Form 990) 2011 Christian Legal Society Part XIV Supplemental Information (continued)	36-6101090	Page 5
Part XIV Supplemental Information (continued)		

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047 2011

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered
 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-ÉZ, Part V, line 38a or 40b.
 ► Attach to Form 990 or Form 990-EZ.
 ► See separate instructions.

Christian Legal Society 36-6101090 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. (c) Corrected? 1 (a) Name of disqualified person (b) Description of transaction Yes No (1) (2) (3) (4) (5) (6)Enter the amount of tax imposed on the organization managers or disqualified persons during the year under ▶ \$ Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ Loans to and/or From Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a. (f) Approved by board or committee? (b) Loan to or from the organization? (c) Original principal amount (a) Name of interested person and purpose (d) Balance due (e) In default? (g) Written То From Yes Yes No No Yes No (1) (2)(3) (4)(5) (6)(7)(8) (9) (10)**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 (c) Amount and type of assistance (1) (2)(3)(4) (5) (6) (7)(8) (9)

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2011

(1) H Robert Showers (2) (3) (4) (5) (6) (7) (8) (9) 0) art V Supplemental Information Complete this part to provide addition	(b) Relationship between interested person and the organization Owns Law Firm/ Director of Organization Onal information for responses to		Fees for Services Lule L (see instructions).	organiz. reven Yes	No X
(2) (3) (4) (5) (6) (7) (8) (9) 0) art V Supplemental Information					X
(3) (4) (5) (6) (7) (8) (9) 0) art V Supplemental Information	onal information for responses to	o questions on Sched	ule L (see instructions).		
4) 5) 6) 7) 8) 9) ort V Supplemental Information	onal information for responses to	o questions on Sched	ule L (see instructions).		
5) 6) 7) 8) 9) 0) art V Supplemental Information	onal information for responses to	o questions on Sched	ule L (see instructions).		
6) 77) 8) 9) 0) art V Supplemental Information	onal information for responses to	o questions on Sched	ule L (see instructions).		
7) 8) 9) 0) art V Supplemental Information	onal information for responses to	o questions on Sched	ule L (see instructions).		
9) 0) art V Supplemental Information	onal information for responses to	o questions on Sched	ule L (see instructions).		
0) art V Supplemental Information	onal information for responses to	o questions on Sched	ule L (see instructions).		
art V Supplemental Information	onal information for responses to	o questions on Sched	ule L (see instructions).		
	onal information for responses to	o questions on Sched	ule L (see instructions).		
. – – – – – – – – – – – – – – – – – – –					
					:

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2011

Open to Public Inspection

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.

Employer identification number Name of the organization 36-6101090 Christian Legal Society Pt_VI,_Line_6_ ___See_Attachment Pt VI, Line 7a See Attachment Pt VI, Line 11a See Attachment Pt_VI, Line 12c See Attachment Pt_VI, Line 15 See Attachment Book to Tax Difference in Depreciation.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2011

Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization Complete if the organization answered 'Yes' to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ► Attach to Form 990. ► See separate instructions.

Inspection

OMB No. 1545-0047

Christian Legal Society 36-6101090 Part I Identification of Disregarded Entities (Complete if the organization answered 'Yes' to Form 990, Part IV, line 33.) (a)
Name, address, and EIN of disregarded entity (c) Legal domicile (state (d) Total income (e) End-of-year assets (f) Direct controlling Primary activity or foreign country) entity (1) Association of Faith Based Organizations 36-6101090 8001 Braddock Avenue, Springfield 22151 See attached. VA N/A Part II 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.) (a)
Name, address, and EIN of related organization (c) Legal domicile (state (d) Exempt Code **(e)** Public charity status (f) Direct controlling **(g)** Sec 512(b)(13) Primary activity or foreign country) section (if section 501(c)(3)) controlled entity? entity Yes No

Part III Identification o because it had o	of Related Organ one or more rela	nizations ted organi	Taxable as a F	Partnership (Co as a partnership	mplete if the org	janization answ year.)	ered '\	es' to	Form 990, I	art IV,	ine 34	ļ
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under	(f) Share of total income	(g) Share of end-of-year assets	Dispi tior	h) ropor- nate ations?	(i) Code V-UB amount in bo 20 of Schedu K-1	Gene man par	(j) eral or aging tner?	(k) Percentage ownership
(4)		country)		sections 512-514)			Yes	No	(Form 1065)	Yes	No	
<u>(1)</u>												
(2)												
<u>(3)</u>												
Part IV Identification o	of Related Organit had one or mo	nizations ore related	Taxable as a (I organizations	Corporation or Tereated as a corp	Frust (Complete poration or trust	e if the organiza during the tax v	tion ar /ear.)	swere	ed 'Yes' to Fo	rm 990	, Part	IV,
	(a)		(b) Primary activit	(c)	(d) Direct	(e) Type of entity (C corp, S corp, or trust)	Share o	(f) of total i	ncome Share	(g) of end-o assets	f-year	(h) Percentage ownership
<u>(1)</u>			_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
			_									
			_									
(2)			_									
	·		- -									
(3)												
			- -									
			_									

Part V Transactions With Related Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34, 35, 35a, or 36.)

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	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?		169	NO
	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1 a		
	Gift, grant, or capital contribution to related organization(s)	1 b		
	Gift, grant, or capital contribution from related organization(s)	1 c		
	Loans or loan guarantees to or for related organization(s)	1 d		
	Loans or loan guarantees by related organization(s)	1 e		
	Loans of loan guarantees by related organization(s)	16		
f	Sale of assets to related organization(s)	1 f		
	Purchase of assets from related organization(s)	1 g		
	Exchange of assets with related organization(s)	1 h		
	Lease of facilities, equipment, or other assets to related organization(s)	1i		
٠	Lease of facilities, equipment, of other assets to related organization(s)	- 11		
	Lease of facilities, equipment, or other assets from related organization(s)	1i		
•	Performance of services or membership or fundraising solicitations for related organization(s)	1 k		
	Performance of services or membership or fundraising solicitations by related organization(s)	11		
	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1 m		
П	Sharing of paid employees with related organization(s)	1 n		
_	Deimburgement neid to related exceptration(s) for expenses	1.		
	Reimbursement paid to related organization(s) for expenses	10		
þ	Reimbursement paid by related organization(s) for expenses	1 p		
_	Other two refers of each as a way why to valeted a way in the valeted as a valeted as valeted as a valeted as	4		
	Other transfer of cash or property to related organization(s)	1 q		
<u>r</u>	Other transfer of cash or property from related organization(s)	1r		
	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.			
	(a) (b) (c) Name of other organization Transaction Amount involved Met	(c) hod of	i) determ	inina
	type (a-r)	mount	involve	∌d
١\				
')_				
<u> </u>				
3)				
1)				
5)				
3)				
- /				

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 five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) 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	501(organiz	oartners tion	(f) Share of total income	(g) Share of end-of-year assets	alloca	nate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(j Gene mana parti	ral or	(k) Percentage ownership
			section 512-514)	Yes	No			Yes	No		Yes	No	
_(1)													
(2)													
7-7													
_(3)													
(4)													
(5)													
(5)	-												
<u>_(6)</u>													
(7)													
_(8)													

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

 OMB No. 1545-0172

2011

Attachment Sequence No. 179

Department of the Treasury Internal Revenue Service Name(s) shown on return

Christian Legal Society

Business or activity to which this form relates

Identifying number 36-6101090

For	m 990 / Form 990E	Z						
Par	Election To Exp Note: If you have any	ense Certain I v listed property, co	Property Under Se emplete Part V before yo	ction 179 ou complete Part I.				
1	Maximum amount (see instru	uctions)					1	
2	Total cost of section 179 pro	perty placed in ser	vice (see instructions).				2	
3	Threshold cost of section 17	9 property before r	reduction in limitation (se	e instructions) .			3	
4	Reduction in limitation. Subtr	act line 3 from line	e 2. If zero or less, enter	-0			4	
5	Dollar limitation for tax year. separately, see instructions.	Subtract line 4 from	m line 1. If zero or less, e	enter -0 If married	d filing		5	
6		Description of property		(b) Cost (business		(c) Elected cost		_
								_
7	Listed property. Enter the an							
8	Total elected cost of section					l l	8	
9	Tentative deduction. Enter the					L	9	
10	Carryover of disallowed ded					F	10	
11	Business income limitation. I Section 179 expense deduct		•	,	,	,	11	
12 13	Carryover of disallowed ded						12	
	: Do not use Part II or Part III				- 13			
Par			ce and Other Depr		at include l	listed property \ (Pag ir	notructions \
	Special depreciation allowan						see II	Istructions.)
	tax year (see instructions)						14	
15	Property subject to section 1					F	15	
16	Other depreciation (including						16	
Par	TIII MACRS Deprec	iation (Do not in	nclude listed property.) (S					
			Section			Т		T
17	MACRS deductions for asse	ts placed in service	e in tax years beginning	before 2011			17	15,421.
18	If you are electing to group a asset accounts, check here.	ny assets placed i	n service during the tax	year into one or m	ore genera	al ▶ □		
			n Service During 2011				yste	m
	(a) Classification of property	(b) Month and year placed in service	(C) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	on (f) Method		(g) Depreciation deduction
19 a	3-year property							
t	5-year property		32,538.	5.0 yrs	HY	200 D	В	6,508.
	7-year property							
	10-year property							
e	15-year property							
f	20-year property							
	25-year property			25 yrs		S/L		
r	Residential rental			27.5 yrs	MM	S/L		
	property			27.5 yrs	MM	S/L		
i	Nonresidential real			39 yrs	MM	S/L		
	property			-	MM	S/L		
	Section C -	Assets Placed in	Service During 2011 T	ax Year Using the	e Alternat	ive Depreciation	Svs	tem
20 a	Class life		3			S/L	-,-	
	12-year			12 yrs		S/L		
	: 40-year			40 yrs	MM	S/L		
Par		structions)		1 10 112				<u>,I</u>
21	Listed property. Enter amoun						1	
22	Total . Add amounts from line 12, li				and on		+	
	the appropriate lines of your return	. Partnerships and S c	orporations — see instruction	s		2	2	21,929.
23	For assets shown above and the portion of the basis attrib	I placed in service	during the current year,	enter	23			

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

	columns	(a) through (c)	of Section A, a	ll of Section	on B, and	l Sectior	n C if app	olicat	ole.			•				
	Secti	on A – Deprec	iation and Oth	er Inform	ation (C	aution:	See the	instr	uctions f	or limi	its for p	assen	ger autor	nobiles.))	
24 8	a Do you have evide	nce to support the b	usiness/investmer	nt use claim	ed?		Yes		No 24b	If 'Yes	,' is the	evidence	written?.		Yes	No
T	(a) ype of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost other b	or	(busine	(e) or deprecia ess/investm use only)	ition nent	(f) Recove period		Met	hod/ ention	Depr	(h) eciation uction	Ele secti	(i) ected ion 179 cost
25	Special depreci	ation allowance n 50% in a qualif	for qualified lis ied business us	ted prope se (see ins	rty place	d in serv	ice durii	ng the	e tax yea	r and		25				
26	Property used r	more than 50% i	n a qualified bu	siness us	e:	-							-			
27	Property used 5	0% or less in a	qualified busine	ess use:		1				1						
															_	
			+												_	
28	Add amounts in	column (h) line	l l	7 Enter h	ere and	on line 2	1 nage	1				28			-	
29	Add amounts in	` ''	ŭ											29		
	7 ad difficulto III	Coldinii (i), iiric	Zo. Enter nere	Section I										25		
	nplete this section our employees, fii			prietor, p	artner, o	r other 'r	nore tha	ın 5%	owner,'						hicles	
30	Total business/	investment miles			a) icle 1		b) icle 2	١	(c) /ehicle 3		(d) Vehic			e) cle 5	(1 Vehi	f) cle 6
	· ·	es)								-						
	Total commuting m	•	•													
32	Total other pers miles driven .	sonal (noncomm														
33	Total miles driv lines 30 through	en during the ye n 32														
				Yes	No	Yes	No	Ye	s No	, ,	Yes	No	Yes	No	Yes	No
34		e available for pe hours?														
35		e used primarily or related perso	by a more n?													
36	Is another vehic personal use?	cle available for														
		Section	C - Question	s for Emp	oloyers V	Nho Pro	ovide Ve	hicle	s for Us	e by	Their E	Employ	/ees			
	wer these questic owners or related			exception	n to comp	oleting S	Section E	for v	ehicles ι	ised b	by emp	loyees	who are	not mo	re than	
37	Do you maintair	n a written policy	statement that	t prohibits	all perso	onal use	of vehic	les, i	ncluding	comn	nuting,				Yes	No
38	Do you maintair	n a written policy e the instruction	statement that	t prohibits	persona	l use of	vehicles	s, exc	ept comr	nuting	g, by yo	our				
39	Do you treat all			•	•			,								
40	Do vou provide		ehicles to your	emplove	es. obtair	n informa	ation fro	m vo	ur emplo	vees a	about t	he use	of the			
41	Do you meet the		concerning qua	lified auto	mobile d	emonstr	ation us	e? (S	See instru	ictions	s.)					
Pai		ization	39, 40, 01 41 15	res, ao	not comp	Jiele Se	CHOIT B I	OI LITE	e covered	ı verii	cies.					
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(a)			(b)		(c)			(d)			(e)		(f)	
	Des	scription of costs		Date an	nortization egins		Amortizab amount	le		Code		Amo pe	ortization riod or centage		Amortization for this yea	
42	Amortization of	costs that begin	s during your 2	011 tax y	ear (see	instructi	ons):									
Rei	no Office			04/2	25/11		15,	970		197	1	7.00	yrs			,569.
See	Additional Amort											<u> </u>	-			,397 <u>.</u>
43		f costs that bega	•	•									43			764.
44	Total. Add am	ounts in column	(f). See the ins	tructions f	for where	to repo	rt						. 44	l	11,	730.

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization ndar year 2011, or fiscal year beginning , 2011, and ending

\bigcirc	AD.	Nio	1645	1070

Department of the Treasury				
Department of the Treasury Internal Revenue Service	► Do not send to	o the IRS. Keep for your records See instructions.	5.	2011
Name of exempt organization			Employer	Identification number
Christian Legal	Society		36-61	01090
Name and title of officer				
Peter F. Rathbun		President		
Part I Type of Retu	ırn and Return Information (Wh	hole Dollars Only)		
the box on line 1a, 2a, 3a, 4	n for which you are using this Form 8879 4a, or 5a, below, and the amount on that applicable, blank (do not enter -0-). But, n 1 line in Part I.	line for the return being filed with	this form was blank, t	hen leave line 1b. 2b.
1 a Form 990 check here	b Total revenue, if any (Form 990 Part VIII column (A) I	ina 12\	1b 1 364 102
2 a Form 990-F7 check h	nere b Total revenue, if a	ny (Form 990-F7 line 9)	1110 12) 1 1 1 1 1 1 1	2b
	ck here ► b Total tax (Forn			3 b
4 a Form 990-PF check t	nere • D b Tax based on inve	estment income (Form 990-PF	Part \/L line 5\	4 b
5 a Form 8868 check her	b Balance Due (Form 88	868 Part Lline 3c or Part II line 8	alt vi, iiile 5)	5 b
T T OTTH GOOD BROOK HOL	o	oo, raiti, inte ocorraitii, inte o	0)	35
Part II Declaration	and Signature Authorization of	f Officer		
electronic return and accom complete. I further declare t allow my intermediate servi receive from the IRS (a) an the return or refund, and (c) electronic funds withdrawal organization's federal taxes contact the U.S. Treasury F authorize the financial instit	I declare that I am an officer of the above panying schedules and statements and that the amount in Part I above is the amce provider, transmitter, or electronic rett acknowledgement of receipt or reason for the date of any refund. If applicable, I are (direct debit) entry to the financial institute owed on this return, and the financial institutions involved in the processing of the equations involved in the processing of the expansion of the	to the best of my knowledge and ount shown on the copy of the or urn originator (ERO) to send the cor rejection of the transmission. (I uthorize the U.S. Treasury and its tion account indicated in the tax publication to debit the entry to this are than 2 business days prior to the electronic payment of taxes to rec	belief, they are true, c ganization's electronic organization's return to o) the reason for any c s designated Financial preparation software for account. To revoke a p ne payment (settlemen eive confidential inforr	orrect, and return. I consent to the IRS and to delay in processing Agent to initiate an prepayment of the payment, I must htt) date. I also mation necessary to
answer inquiries and resolv	e issues related to the payment. I have surn and, if applicable, the organization's	elected a personal identification	numbar (PINI) ac my ci	ignature for the
answer inquiries and resolv organization's electronic ret	ourn and, if applicable, the organization's	selected a personal identification consent to electronic funds withd	number (PIN) as my si rawal.	ignature for the
answer inquiries and resolv organization's electronic ret	ourn and, if applicable, the organization's	elected a personal identification	number (PIN) as my si rawal. / PIN Enter five nu	ignature for the as a my signature
answer inquiries and resolv organization's electronic ret Officer's PIN: check one but a uthorize on the organization's tax a state agency(ies) regulate return's disclosure of	ERO firm name x year 2011 electronically filed return. If I lating charities as part of the IRS Fed/Sconsent screen.	selected a personal identification consent to electronic funds withd to enter my large and to enter my large and the indicated within this return tate program, I also authorize the	rawal. / PIN Enter five nu do not enter that a copy of the retu aforementioned ERO	as my signature as my signature mbers, but rall zeros rn is being filed with to enter my PIN on
answer inquiries and resolv organization's electronic ret Officer's PIN: check one but a unaborize on the organization's tax a state agency(ies) regulate return's disclosure companization the organization indicated within this return indicated within this return.	curn and, if applicable, the organization's DOX ONLY ERO firm name ERO year 2011 electronically filed return. If I lating charities as part of the IRS Fed/S	to enter my later program, I also authorize the state approximation or the organization's tax year.	rawal. / PIN Enter five nu do not enter that a copy of the retu aforementioned ERO	as my signature as my signature all zeros rn is being filed with to enter my PIN on
answer inquiries and resolv organization's electronic ret Officer's PIN: check one but a unit and a state agency(ies) regulate return's disclosure of the organization of the organization in the return's disclosure of the return's disclosure of the organization in the organization in the organization in the organization of the organization in t	ERO firm name x year 2011 electronically filed return. If I lating charities as part of the IRS Fed/Siconsent screen. anization, I will enter my PIN as my signaturn that a copy of the return is being filed. PIN on the return's disclosure consent s	to enter my later program, I also authorize the state approximation or the organization's tax year.	rawal. / PIN Enter five nu do not enter that a copy of the retu aforementioned ERO	as my signature as my signature all zeros rn is being filed with to enter my PIN on
answer inquiries and resolv organization's electronic ret Officer's PIN: check one but a unaborize on the organization's tax a state agency(ies) regulate return's disclosure companization the organization indicated within this return indicated within this return.	ERO firm name x year 2011 electronically filed return. If I lating charities as part of the IRS Fed/Siconsent screen. anization, I will enter my PIN as my signaturn that a copy of the return is being filed. PIN on the return's disclosure consent s	to enter my lawer indicated within this return tate program, I also authorize the sture on the organization's tax year with a state agency(ies) regulation.	rawal. PIN Enter five nu do not enter that a copy of the retu aforementioned ERO ar 2011 electronically fing charities as part of	as my signature as my signature all zeros rn is being filed with to enter my PIN on
answer inquiries and resolv organization's electronic ret Officer's PIN: check one build a state agency (ies) regulate return's disclosure of the organization of the organization in the return's disclosure of the return's disclosure of the organizated within this return officer's signature Part III Certification ERO's EFIN/PIN. Enter you	ERO firm name x year 2011 electronically filed return. If I lating charities as part of the IRS Fed/Siconsent screen. anization, I will enter my PIN as my signaturn that a copy of the return is being filed. PIN on the return's disclosure consent s	to enter my to enter my tate program, I also authorize the atture on the organization's tax years with a state agency(ies) regulation.	PIN Enter five nu do not enter that a copy of the retu aforementioned ERO ar 2011 electronically fing charities as part of	as my signature as my signature mbers, but rall zeros rn is being filed with to enter my PIN on
answer inquiries and resolv organization's electronic ret Officer's PIN: check one build a state agency (ies) regulate return's disclosure of the organization of the organization of the return's disclosure of the return's disclosure of the organizated within this return of the organizated within this return officer's signature Part III Certification ERO's EFIN/PIN. Enter you number (EFIN) followed by the certify that the above number of the organization of the certify that the above number of the certify that the above number of the certify that the above number of the certification of the certify that the above number of the certify that the above number of the certification of the certify that the above number of the certification of the certificatio	ERO firm name x year 2011 electronically filed return. If I lating charities as part of the IRS Fed/Sizonsent screen. anization, I will enter my PIN as my signar that a copy of the return is being filed. PIN on the return's disclosure consent services and Authentication and Authentication r six-digit electronic filing identification your five-digit self-selected PIN	to enter my to enter my to enter my tate program, I also authorize the ature on the organization's tax years with a state agency(ies) regulation. Date	return for the organiz	as my signature mbers, but all zeros rn is being filed with to enter my PIN on liled return. If I have the IRS Fed/State 54260212345 do not enter all zeros

BAA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2011)

Christian Legal Society 36-6101090

1

Schedule O (Form 990), Supplemental Information to Form 990

Form 990, Page 2, Part III, Line 4d (continued)

Describe the exempt purpose achievements for each of the organization's other program services. Section 501(c)(3) and (4) organizations and 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.

Code:	Description:	Law Student Ministries:
Expenses _	121,455.	Campus ministry.
Grants Of	0.	
Revenue	15,660.	
Code:	Description:	Christian Legal Aid Ministries:
Expenses _	104,453.	Legal aid, Biblical reconciliation, and legal referral
Grants Of _	0.	
Revenue.	95,910.	

Schedule O (Form 990), Supplemental Information to Form 990

Form 990, Page 6, Line 17 (continued)

Alaska
Arizona
Colorado
Kentucky
Maryland
Minnesota
North Dakota
New Hampshire
Tennessee
Virginia
Washington
Wisconsin
West Virginia
Maine
New Mexico

Form 4562, line 42

Additional Amortization Statement

(a) Description of costs	(b) Date amorti- zation begins	(c) Amortizable amount	(d) Code section	(e) Amorti- zation period or percentage	(f) Amortization for this year
Website - Blackbaud Blackbaud Costs Religious Liberty Advocates Add'l Costs for Blackbaud	05/24/11	13,730.	197	3.00 yrs	2,784.
	07/31/11	6,705.	197	3.00 yrs	943.
	11/01/11	1,000.	197	5.00 yrs	33.
	02/24/11	9,284.	197	3.00 yrs	2,637.

Total _____6,397.

Supporting Statement of:

Form 990 p 12/Part XI, Line 5

Description	Amount
Book to Tax Difference In depreciation	8,608.
Book to Tax Differences in Donated Facilites	6,300.

Total 14,908.

Form 990 p 1: Pt I, Ln 1, Mission

To inspire, encourage, and equip lawyers and law students, both individually and in community, to proclaim, love and serve Jesus Christ through the study and practice of law, the provision of legal assistance to the poor, and the defense of religious freedom & sanctity of human life.

Form 990 p 2: Organization Mission-1

Founded in 1961, Christian Legal Society (CLS) is a national, non-profit, religious, membership association of lawyers, judges, law professors, law students, paralegals, legal assistants, and associated friends of the society. All officers, directors, employees, and members of CLS, as a condition of the employment and/or membership, affirm the following statement of faith:

Trusting in Jesus Christ as my savior, I believe in:

- One God, eternally existent in three persons: Father, Son, and Holy Spirit.
- God the Father Almighty, maker of heaven and earth.
- The deity of our Lord Jesus Christ, God's only son, conceived of the Holy Spirit, born of the virgin Mary; His vicarious death for our sins through which we receive eternal life; His bodily resurrection and personal return.
- The presence and power of the Holy Spirit in the work of regeneration.
- The Bible as the inspired word of God.

For over 50 years, CLS members have been "Seeking justice with the Love of God" through four primary ministries:

Attorney Ministries: CLS attorney chapters throughout the country provide legal professionals with a wide range of opportunities. These include Christian fellowship and spiritual development, discipleship, law student mentoring, contributions to The Christian Lawyer magazine, legal referrals, and volunteer legal service on behalf of the poor and needy.

Law Student Ministries: CLS helps students in law schools across the country integrate their Christian faith with the study and eventual practice of law. Our Law Student Ministries include Bible studies, one-on-one mentoring, student-focused conferences, and faith-based curriculum services to law schools.

Legal Aid Ministries: Since 2000, thousands of CLS members have donated hundreds of thousands of legal service hours to helping the disadvantaged untangle legal issues, seek Christian guidance for personal problems, and understand their rights under the law.

Center for Law and Religious Freedom (CLRF): As the country's oldest Christian advocacy ministry for religious liberty, CLRF has initiated law suits, filed amicus briefs, argued cases, and worked with Congress to defend our

Christian Legal Society 36-6101090
Form 990 p 2: Organization Mission-1 (Continued)
Constitution's First Amendment protection of religious freedom.
Schedule O: Explanation Smt Wks-1
Yes-Members. Each candidate for membership shall submit to the corporation an application in a form approved by the board of directors of the corporation. However, no applicant shall be accepted as a member unless he or she affirmatively indicates in the application that he or she is trusting Jesus Christ as his or her personal Savior and accepts and agrees with the corporation's statement of faith. The members are divided into three classes: Regular Members, Student Members, and Associate Members. Regular Members include those who are members of the bar of any jurisdiction of the United States or who are law school graduates. Student Members include those who are enrolled in law schools or other higher educational institutions in the United States. Associate members include all members of the corporation who are neither regular or student members.
Schedule O: Explanation Smt Wks-2
The number of the members of the board of directors of the corporation to be elected annually by the regular members of the corporation entitled to vote shall be that number necessary to fill the number of directors established by the board and shall be elected from a list of candidates selected by the board governance and nominating committee. Members of the board of directors who have been elected by the regular members of the corporation or appointed to fill a vacancy in a seat the occupant of which is normally elected by the regular board members of the corporation, may be re-nominated by the board governance and nominating committee and reelected by the board of directors and the number of members of the board of directors to be elected by the regular members of the corporation shall be reduced accordingly. Two (2) members of the board of directors of the corporation may be appointed annually by the board of directors from a list of candidates selected by the board governance and nominating committee. In addition to the qualifications of all other board members elected by the regular members of the corporation entitled to vote, the candidates to be appointed hereunder by the board of directors shall have not have served on the board of directors of the corporation at any time within a two-year period before their initial appointment.
Schedule O: Explanation Smt Wks-3
The Executive Director/CEO provided a copy of the CLS draft Form 990 to each Board Member at the CLS Board of Directors meeting for review, discussion and approval before the Form 990 was to be filed.

Schedule O: Explanation Smt Wks-4

CLS has written Conflict of Interest Policy that is provided to each officer, director, and all employees when an individual joins the Board of Directors or an employee is hired. All individuals are reminded of this policy periodically during Board Meetings or staff meetings. Officers and Directors are required to review and sign their

Additional Information For Tax Return

Christian Legal Society	36-6101090
Schedule O: Explanation Smt Wks-4 (Continued)	
acknowledgement of the conflict of interest policy annually.	
Schedule O: Explanation Smt Wks-5	
The Board of Directors determines the compensation of the Executive Director/CEO after independence researching comparable compensation packages for similar organizations. The Executive Committee Committee, and Search Committee (when applicable) present the recommendation to the Board of The Executive Director/CEO is responsible for recommending compensation for CLS staff. Recommandation are presented to the APF Committee during the annual budget process for approval. The APF Compresents compensation recommendations to the Board of Directors for approval.	ee, APF Directors. nmendations
Schedule R: Primary Activity-1	

Defending religious freedom of faith based organizations and other charitable purposes.