

Form 990-EZ

Short Form 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 1545-1150

2008

Department of the Treasury Internal Revenue Service

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

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

Open to Public Inspection

A For 2008 calendar year, or tax year beginning, 2008, and ending, 20

B Check if applicable: Address change, Name change, Initial return, Termination, Amended return, Application pending. C Name of organization: LIGHTHOUSE WORLD EVANGELISM. D Employer identification number: 95-4648289. E Telephone number: (707) 546-5800. F Group Exemption Number.

G Accounting method: [X] Cash [] Accrual Other (specify). H Check [] if organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF).

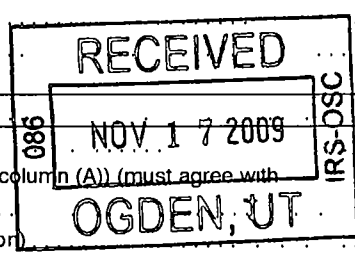
I Website: N/A. J Organization type: [X] 501(c)(3) (insert no) 4947(a)(1) or 527.

K Check [] if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ. \$ 38,968

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)

Table with 21 rows for Revenue, Expenses, and Assets. Revenue total: 38,968. Expenses total: 38,003. Net assets at end of year: 1,810.



Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ

Table with 7 rows for Balance Sheets. (A) Beginning of year, (B) End of year. Total assets: 845. Total liabilities: 0. Net assets: 845.

For Privacy Act and Paperwork Reduction Act Notice, see the Instruction for Form 990. Form 990-EZ (2008)

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67 25

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		
a	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		X
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	
b	Did the organization file Form 1120-POL for this year?	37b	X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a	X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39	Section 501(c)(7) organizations Enter		
a	Initiation fees and capital contributions included on line 9	39a	
b	Gross receipts, included on line 9, for public use of club facilities	39b	
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911, section 4912, and section 4955		
b	Section 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I	40b	X
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d	Enter amount of tax on line 40c reimbursed by the organization		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	X

41 List the states with which a copy of this return is filed **NONE**

42a The books are in care of **See attachment #4** Telephone no _____
 Located at _____ ZIP + 4 _____

		Yes	No
b	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)? If "Yes," enter the name of the foreign country _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	42b	X
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country. _____	42c	X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 -- Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year **43**

		Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51

- 46 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
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
49a Did the organization make any transfers to an exempt non-charitable related organization?
b If "Yes," was the related organization(s) a section 527 organization?
50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

Table with 5 columns: (a) Name and address of each employee paid more than \$100,000, (b) Title and average hours per week devoted to position, (c) Compensation, (d) Contributions to employee benefit plans & deferred compensation, (e) Expense account and other allowances. Content: NONE

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 3 columns: (a) Name and address of each independent contractor paid more than \$100,000, (b) Type of service, (c) Compensation. Content: NONE

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge
Signature of officer: Matthew C. Manning
Date: Nov 10, 2009
Type or print name and title: MATTHEW MANNING PRESIDENT

Paid Preparer's Use Only Preparer's signature: [Signature] Date: 08-25-2009 Check if self-employed: [] Preparer's Identifying No. (See instr):
Firm's name (or yours if self-employed), address, and ZIP+4: THE TAX SPECIALISTS 9036 RESEDA BLVD STE 203
EIN: Phone no: 818-993-0045

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [] No

Public Charity Status and Public Support

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

Name of the organization: **LIGHTHOUSE WORLD EVANGELISM** Employer identification number: **95-4648289**

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 (Please check only **one** organization.)

- 1 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)**. (Attach Schedule H.)
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state.
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 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.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions--subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III-Functionally integrated
 - d Type III-Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box.
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? N/A
 - (ii) A family member of a person described in (i) above? N/A
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above? N/A

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the organizations the organization supports

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	29,325	31,641	25,714	34,281	38,968	159,929
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1-3	29,325	31,641	25,714	34,281	38,968	159,929
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						159,929

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	29,325	31,641	25,714	34,281	38,968	159,929
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						159,929

12 Gross receipts from related activities, etc (see instructions) **12**

13 First five years: If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	100.0000	%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	100.0000	%

16a 33 1/3 % support test -- 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3 % support test -- 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test -- 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test -- 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

PRIMARY EXEMPT PURPOSE

Attachment 1: page 0 - 990-EZ Page 2, Part III

Open to Public Inspection	For calendar year 2008 or tax period beginning	, and ending
Name of Organization	Employer Identification Number	
LIGHTHOUSE WORLD EVANGELISM	95-4648289	

Primary Purpose

EVANGELISTIC OUTREACH TO BRING THE UNSAVED TO JESUS CHRIST AS SAVIOR

PROGRAM SERVICE ACCOMPLISHMENT

Attachment 2: page 1 - 990-EZ Page 3, Part III

Open to Public Inspection	For calendar year 2008 or tax period beginning	, and ending
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Name of Organization LIGHTHOUSE WORLD EVANGELISM	Employer Identification Number 95-4648289
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Part III - Statement of Program Service Accomplishments			
Grants and allocations	Amount includes foreign grants	Program service expenses	10,218
Exempt Purpose Achievements			

OUTREACH TO THE UNSAVED TO BRING THEM TO SALVATION THRU JESUS CHRIST.

CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

Attachment 3: page 1 - 990-EZ Page 2, Part IV

Open to Public Inspection For calendar year 2008 or tax period beginning , and ending

Name of Organization **LIGHTHOUSE WORLD EVANGELISM** Employer Identification Number **95-4648289**

(A) Name and Address	(B) Title and Average Hrs per Week	(C) Compensation (If not paid, enter 0)	(D) Cont to Employee Ben Plans & Def Comp	(E) Expense Account & Other Allowances
MATTHEW C. MANNING PO BOX 7349 Santa Rosa, CA 95407	PRESIDENT	0	0	0
CHRISTA M. MANNING PO BOX 7349 Santa Rosa, CA 95407	SECRETARY/TRE	0	0	0

BOOKS ARE IN CARE OF

Attachment 4 - 990-EZ Page 3, Part V, Line 42a

Open to Public Inspection	For calendar year 2008 or tax period beginning	, and ending
Name of Organization LIGHTHOUSE WORLD EVANGELISM		Employer Identification Number 95-4648289
Part V - Line 42a		

Individual Name MATTHEW MANNING
or
Business Name.

Street Address P.O. BOX 7349

U S Address.

Zip code 95407 City Santa Rosa State CA
or

Foreign Address

City _____

Province or State _____

Country _____

Postal code _____

Phone Number (707) 546-5800

Fax Number _____

2008 DETAIL STATEMENTS

LIGHTHOUSE WORLD EVANGELISM
95-4648289

STATEMENT #1 - Printing, publication, postage (990 EZ PG 1 Line 15)

BOOKS, SUBS, REFERENCE.....	69
COMPUTER SOFTWARE.....	2,167
EQUIPMENT/TELEPHONE.....	698
MEMBERSHIPS.....	-5
MEALS/FOOD/SPIRITUAL GUIDANCE.....	111
PO RENTAL.....	303
POSTAGE.....	47
SUPPLIES.....	1,128
CHARITABLE.....	550
FOOD/BUSINESS RELATED.....	576
FOOD.....	262
MISC.....	32
EVANGELISM/MINISTRY.....	638
BENEVOLENCE.....	392
MISSIONS.....	250

TOTAL CARRIED TO 990 EZ PG 1 Line 15..... 7,218

STATEMENT #2 - Contributions, gifts, grants (EZ1 PF1 Line 1)

MISC INCOME.....	382
RECORDED AS EQUITY ON BOOKS	
CONTRIBUTIONS RECEIVED.....	503
FYIC CLASS	
OTHER CONTRIBUTIONS REC.....	38,083

TOTAL CARRIED TO EZ1 PF1 Line 1..... 38,968

STATEMENT #3 - Salaries, Other Compensations (990-EZ PG 1 Line 12)

STAFF HOUSING ALLOWANCE.....	18,000
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TOTAL CARRIED TO 990-EZ PG 1 Line 12..... 18,000

STATEMENT #4 - Professional Fees (990-EZ PG 1 Line 13)

ACCOUNTING.....	400
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TOTAL CARRIED TO 990-EZ PG 1 Line 13..... 400

STATEMENT #5 - Occupancy, Rent, Utilities (990-EZ PG 1 Line 14)

OCCUPANCY EXP - UTILITIES.....	7,951
OCCUPANCY EXP - TELEPHONE.....	2,739
MINISTRY HOUSE SUPPLIES.....	1,695

TOTAL CARRIED TO 990-EZ PG 1 Line 14..... 12,385