#### 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

2010

Open to Public Inspection

► The organization may have to use a copy of this return to satisfy state reporting requirements. Department of the Treasury Internal Revenue Service  $3/3\overline{1}$ 2011 , 2010, and ending For the 2010 calendar year, or tax year beginning 4/01 D Employer Identification Number Check if applicable: 92-6004561 INTERACT MINISTRIES, INC. Address change Telephone number 31000 SE KELSO RD. Name change 503-668-5571 BORING, OR 97009 Initial return Terminated 2,775,751. G Gross receipts \$ Amended return H(a) Is this a group return for affiliates? X No Yes F Name and address of principal officer: Application pending H(b) Are all affiliates included? No SAME AS C ABOVE If 'No,' attach a list. (see instructions) 4947(a)(1) or ) ◀ (insert no.) X 501(c)(3) 501(c) ( Tax-exempt status H(c) Group exemption number Website: ► WWW.INTERACTMINISTRIES.ORG M State of legal domicile: L Year of Formation: Form of organization: X Corporation Trust Association Part I Summary 1 Briefly describe the organization's mission or most significant activities: <u>INTERACT MINISTRIES IS A RELIGIOUS</u> ORGANIZATION ASSOCIATED WITH CHURCHES OF THE PROTESTANT FAITH. Activities & Governance if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a)..... 4 Number of independent voting members of the governing body (Part VI, line 1b)..... 4  $\overline{47}$ Total number of individuals employed in calendar year 2010 (Part V, line 2a)..... 5 6 Total number of volunteers (estimate if necessary)..... 6 7a Total unrelated business revenue from Part Vill, column (C), line 12..... b Net unrelated business taxable income from Form 990-T, line 34..... Prior Year **Current Year** 2,452,651. 2,658,256. 98,874. 84,337. Program service revenue (Part VIII, line 2g)..... Revenue 206,039. 268.616. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)..... 29,967. 374. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 772,994. 3,026,120 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 1,134,853. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... 933,474 14 Benefits paid to or for members (Part IX, column (A), line 4)..... 008,674. 1,287,972 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)..... 16a Professional fundraising fees (Part IX, column (A), line 11e).... b Total fundraising expenses (Part IX, column (D), line 25) ► 67, 273. 489,968. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)..... 693,865. 2,633,495. 2,915,311 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)..... 139,499. 110,809. 19 Revenue less expenses. Subtract line 18 from line 12..... Beginning of Current Year End of Year 2,091,567. 1,862,293. Total assets (Part X, line 16)..... 208,811. 235,391 Total liabilities (Part X, line 26)..... 1,626,902. 1,882,756. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Date Signature of officer Sign Here Type or print name and title. Prenarer's signature Print/Type preparer's name 7/19/11 P00154168 LARRY E. BYERS self-employed LARRY E. Paid ► BYERS & HURLBURT, LLC Preparer Firm's EIN ► 93-1071802 ► 4000 SW KRUSE WAY PLACE, Use Only Firm's address 598-2303 Phone no. (503) LAKE OSWEGO, OR 97035

No

Yes

For	m 990 (2010) INTERACT MINISTRIES, INC.	92-6004361	rage Z
	ort III   Statement of Program Service Accomplishments		real .
	Check if Schedule O contains a response to any question in this Part III		X
7	Diefly describe the organization's mission:		
1	INTERACT MINISTRIES IS A RELIGIOUS ORGANIZATION ASSOCIATED WITH	CHURCHES OF THE	
	INTERACT MINISTRIES IS A RELIGIOUS ORGANIZATION RESOCIATED THE		
	PROTESTANT FAITH.		
			<del>-</del>
	Did the organization undertake any significant program services during the year which were not listed	I on the prior	
4	Form 990 or 990-EZ?	Yes	X No
	If 'Yes,' describe these new services on Schedule O.	services? Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	Services:	110
	15 Was I describe these changes on Schedule O		E01()(0)
4	Describe the exempt bloose achievements for each of the organization's three largest program services the exempt bloose achievements for each of the organization's three largest program services are required to report the amount of grants	rices by expenses. Section	501(c)(3)
•	and following arrangement and challenges and challenges are required to report the second and	and anocations to others,	tile total
	expenses, and revenue, if any, for each program service reported.		
	la (Code: 824, 340. including grants of \$820, 809.)	(Revenue \$	)
4	CANADA - CHURCH PLANTING AND EVANGELISM SERVING APPROXIMATELY	30 CHURCHES AND	
	CANADA - CHORCH FLANTING AND EVANGERISM SERVICES		
	COMMUNITIES IN WESTERN CANADA.		
		<del>-</del>	
	104 503	\ (D &	
4	<b>1b</b> (Code: \$ 523,857. including grants of \$ 104,582.	) (Revenue \$	
	CHURCH PLANTING AND EVANGELISM, SERVING APPROXIMATELY 30 CHURCH	HE2	
			<del>-</del>
_	4c (Code: Spenses \$ 414,036. including grants of \$ 193,428.	) (Revenue \$	)
4	COMMUNITY DEVELOPMENT - COMMUNITY DEVELOPMENT PROJECTS TO HELP	NATIONAL CHURCHE	ES
	COMMONITY DEVELOPMENT - COMMONITY DEVELOPMENT I VOO DELD TO THEFT		
	OBTAIN FINANCIAL STABILITY.		
		<del></del>	
4	4d Other program services. (Describe in Schedule O.)  SEE SCHEDULE O		
	(Expenses \$ 58,742. including grants of \$ ) (Revenue	\$	_)
	Ao Total program service expenses > 1.820.975.		

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	t IV Checklist of Required Schedules		<u>,                                    </u>	
			Yes	No_
	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	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		<u>X</u> _
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		<u>X</u> _
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		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		X
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_		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? It 'Yes,' complete Schedule D, Part V	100000000000000000000000000000000000000	e de desta	<u>X</u> _
11	the fellowing questions is 'Yes', then complete Schedule D. Parts VI, VIII, IX,			
	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	<u> </u>
	Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
	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		X
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	X	<del> </del>
1	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
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D. Parts XI, XII, and XIII	12a	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	12 b	1	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	17	X
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	+
;	<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Parts I and IV	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	-	<u> </u>
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		X
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	-	X
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'	19		X
20	aDid the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		<u> </u>
	b If 'Yes' to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)			
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Form	990 (2010) INTERACT MINISTRIES, INC. 92-6004561		P.	age 4
	t 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	~ <u>.</u> .	_X_
	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		X
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	-	<u>X</u> _
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		<del></del>
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
	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		X
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		X
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	i	<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III.	27		X
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
k	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV.	28b		Х
	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	<u> </u>	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		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
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		X
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_		X
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V,	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
ā	a 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			
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		X
37	The set of	37	<u> </u>	X
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	X	
DAA		Forr	n <b>990</b>	(2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V. Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable..... Ta 0 **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable...... c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. . . . . 47 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?..... 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) Χ 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?...... За 3b b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q.... 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Χ financial account in a foreign country (such as a bank account, securities account, or other financial account)?..... 4a **b** If 'Yes,' enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Χ 5a 5a 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?. 5b 5c c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?..... 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Χ 6a solicit any contributions that were not tax deductible?.... **b** If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and X 7 a services provided to the payor?..... Χ 7b **b** If 'Yes,' did the organization notify the donor of the value of the goods or services provided?..... c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Χ 7с d If 'Yes,' indicate the number of Forms 8282 filed during the year..... X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?..... 7е Χ 7f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7q as required?..... h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7h Form 1098-C?.... 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 holdings at any time during the year?.... 9 Sponsoring organizations maintaining donor advised funds. 9a a Did the organization make any taxable distributions under section 4966?..... 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12..... 10 a **b** Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . 11 Section 501(c)(12) organizations. Enter: 11 a a Gross income from members or shareholders ..... b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?..... 12a **b** If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year. . . . . . 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13 a a is the organization licensed to issue qualified health plans in more than one state?..... 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 c Enter the amount of reserves on hand..... 14a b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O...... 14b

Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for Part VI 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..... Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year . . . . 힑 b Enter the number of voting members included in line 1a, above, who are independent . . . . 1 b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 officer, director, trustee or key employee?.... Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.... Χ 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . . . 5 X 6 6 Does the organization have members or stockholders?.... 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the Χ governing body?.... X **b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons?..... 7ь Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a a The governing body?..... X **b** Each committee with authority to act on behalf of the governing body?.... 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No Yes Χ 10 a Does the organization have local chapters, branches, or affiliates?..... **b** If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?..... 10b 11 a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?..... b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13..... Χ 12a **b** Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise Χ 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done.....SEE .SCHEDULE. O...... 12 c Χ 13 13 Does the organization have a written whistleblower policy?..... X 14 Does the organization have a written document retention and destruction policy?.... 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a X a The organization's CEO, Executive Director, or top management official..... X 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X 16a taxable entity during the year?.... b if 'Yes,' has the organization adopted 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 organization's exempt status with respect to such arrangements? 16h Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. X Upon request X Another's website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial SEÉ SCHEDULE O statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

►ROY MARTIN 31000 SE KELSO ROAD BORING OR 97009 503-668-5571

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

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

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

- 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.

n nor any	relate	d or	gan	izat	ion co	mpe	ensated any current of	ficer, director, or trust	ee
(B)			((	<b>(</b> 2			(D)	(E)	(F)
Average hours per week (describe hours for related organizations in Schedule O)	Individual trustee	institutional trustee			a Highest compensated a employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
40							0.1	0.	0.
	_		<del></del> -		<del></del>		~ ·		<u>.</u>
0	Х		Х				0.	0.	0.
0	Х		Х	<b>.</b>			0.	0.	0.
0	х		Х				0.	0.	0.
							0.	0.	0.
									0.
0	X			_		_	<u> </u>	0.	<u></u>
0	X						0.	0.	0.
0	X						_0.	0.	0.
40	x			X			37,267.	0.	0.
0	Х						0.	0.	0.
40				Х			43,300.	0.	0.
<u>]</u>									
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				-					
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	Average hours per week (describe hours for related organizations in Schedule O)  40  0  0  0  0  0  0  0	Average hours per week (describe hours for related organizations in Schedule O)  40  0 X  0 X  0 X  0 X  0 X  0 X  0 X	Average hours per week (describe hours for related organizations in Schedule O)  A O X	Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours for individual trustee elements for schedule O)  Average hours for individual trustee elements for schedule O)  Average hours for individual trustee elements for schedule O)  Average hours for individual trustee elements for schedule O)  Average hours for individual trustee elements for schedule O)  Average hours for individual trustee elements for schedule O)  Average hours for individual trustee elements for schedule O)  Average hours for individual trustee elements for schedule O)  Average hours for individual trustee elements for schedule O)  Average hours for individual trustee elements for schedule O)  Average hours for individual trustee elements for schedule O)  Average hours for individual trustee elements for schedule O)  Average hours for individual trustee elements for schedule O)  Average hours for individual trustee elements for schedule O)	Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  AVE AVERAGE HOUSE Position (check all the first in stirrition in stirrition in schedule O)  AVE AVERAGE HOUSE POSITION (check all the first in stirrition in stirrition in schedule O)  AVE AVERAGE HOUSE POSITION (check all the first in stirrition in stirrition in schedule organizations in schedule O)  AVERAGE HOUSE POSITION (check all the first in stirrition in stirrition in stirrition in schedule organizations in schedule organization in schedule organiza	Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours per week (describe hours for related organizations in Schedule O)  Average hours for individual itution in Schedule organizations in Schedule O)  Average hours for individual itution itution in Schedule organizations in Schedule O)  Average hours for individual itution i	Average hours per week (describe hours for related organizations in Schedule CO)  O X X X  O	Average   Position (check all that apply)   Reportable   Reportable	Average   Position (check all that apply)   Reportable   Compensation from the organization   Check all that apply)   Reportable   Compensation from the organization   Check all that apply)   Reportable   Compensation from the organization   Check all that apply)   Reportable   Compensation from the organization   Check all that apply)   Check all that apply)   Reportable   Compensation from the organization   Check all that apply)   Check all that apply   Chec

Part VII   Section A. Officers, Directors, Trus	stees, k	(ey	Em	plo	ye	es,	an	d Highest Con	npensated Emp	loyees (cont)
(A)	(B)			(6	c)			(D)	(E)	(F)
Name and title	Average hours	Posi	tion (					Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	or in	รษ	Officer	Key	Highest compen- employee	Former	the organization	related organizations (W-2/1099-MISC)	compensation from the
	hours for	ivid	<u>#</u>	cer	en en	hest ploy	mer	(W-2/1099-MISC)	(W-2/1099-MISC)	organization
	related organi-	함	on a		employee	ee				and related organizations
	zations	trust	7		yee	npe				
	hours per week (describe hours for related organi- zations in Sch O)	66	stee			S				
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<u>(21)</u>	-									
and the state of t	ļ	<u> </u>			┝	<u> </u>			<u> </u>	<del>                                     </del>
<u>(22)</u>	-									
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(23)	_									
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(24)	_									1
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(25)	_[					1			1	
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(26)	_					1				
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(27)	_								ļ	
		l		<u> </u>						
(28)										
<u> </u>	_		l							
(29)								-		
<u> </u>	_					<u>L.,</u>				
1 b Sub-total					<i>.</i> .		<b>•</b>	80,567.		1
c Total from continuation sheets to Part VII, Section								0.	0.	<del></del>
d Total (add lings 1h and 1c)							-	80,567.	0.	
Total number of individuals (including but not limit	ed to the	se l	isted	d ab	ove	) wi	no re	eceived more than	1 \$100,000 in repor	table compensation
from the organization   0										
nont the organization										Yes No
3 Did the organization list any former officer, direct	or or trus	tee	kev	em	rola	/ee.	or h	niahest compensa	ted employee	
3 Did the organization list any tormer officer, directly on line 1a? If 'Yes,' complete Schedule J for such	individu	al			,					3 X
a man in the literal field and line To lie the cum of a	roportabl	A C0	mne	anca	ation	an	d ot	her compensation	from	
the organization and related organizations dreater	tnan 51:	JU.U	UU:	11	r es	coi	прте	te schedule s loi		. 4 X
such individual										3. 1.4 ±1.7 € 1.740
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,	compen	satio	on fr	om	any	uni	relat	ed organization o	r individual	.   5   X
for services rendered to the organization? If Yes,	' comple:	te S	cnec	iuie	J 10	or su	ich j	person		3
Section B. Independent Contractors  1 Complete this table for your five highest compens	atad inde	nor	nden	t co	ntra	ctor	's th	at received more	than \$100,000 of	
<ol> <li>Complete this table for your five highest compens compensation from the organization.</li> </ol>	ateu mu	spei	lucii	1 00	1100	10101	J (11			
(A)								(1	3)_	(C)
Name and business addre	ess							Description	of services	Compensation
- Add Add Add Add Add Add Add Add Add Ad										
The state of the s										
									_	
									-	
2 Total number of independent contractors (including	or but no	+ li⊷	nited	to:	thos	ما م	sted	above) who rece	ived more than	
\$100,000 in compensation from the organization		ri illi	iii CU	LO	u ios	, C 11:	JUU	25010, HIIO 1000		
S LOO DOO to compensation from the organization	- 0									

rai	t vin Statement of Revenue		<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	g Noncash contributions included in lns 1a-1f: \$ h Total. Add lines 1a-1f	52,651. 12,183. hess Code	2,452,651. 71,623. 12,714.			71,623. 12,714.
PROGRAM	f All other program service revenue g Total. Add lines 2a-2f.	<u></u> ►	84,337.	以有容易。( <b>被要</b> (4) 8	<b>建设</b> 上 (特殊) (1947)	
	<ul> <li>Investment income (including dividends, interested other similar amounts).</li> <li>Income from investment of tax-exempt bond processes.</li> <li>Royalties.</li> </ul>	oroceeds >	46,437.	2755-1-10 (2750-100)	and the control of th	46,437.
	6a Gross Rents  b Less: rental expenses. c Rental income or (loss)  d Net rental income or (loss)	i) Personal				
	7a Gross amount from sales of assets other than inventory.  b less: cost or other basis	(ii) Other 62, 359. 2, 757.				
	d Net gain or (loss)	59,602.			C. Will.	159,602.
OTHER REVENUE	8a Gross income from fundraising events (not including. \$					
	9a Gross income from gaming activities. See Part IV, line 19					
	10a Gross sales of inventory, less returns and allowances					
	Miscellaneous Revenue Bus  11 a MTSCELLANEOUS  b	iness Code	29,967	\$50 E50 1983		29,967.
	d All other revenue			-	<del> </del>	
	e Total. Add lines 11a-11d		237307		Maria sus	
	12 Total revenue. See instructions		2,772,994		. 0.	320,343.

#### 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).

	All other organizations must comp	lete column (A) but are	not required to complet	te columns (B), (C), and	1 (D).
Do 1	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21.	104,592.	104,592.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	1,030,261.	1,030,261.		
4 5	Benefits paid to or for members	961,991.	480,028.	439,303.	42,660.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				0.700
10	Payroll taxes	46,683.	24,852.	19,111.	<u>2,720.</u>
11	Fees for services (non-employees):				
	Management				
	Legal		<del></del>		
	: Accounting				
	Lobbying		Park i na chindi ya ku u katikili kila ba	LEAL Rains of the Park Street, or the Res	
	Professional fundraising services. See Part IV, line 17			对那位第二十二次期间。4、5 1年8	
f	Investment management fees				
c	Other				
_	Advertising and promotion				
13	Office expenses	- 000	696.	5,077.	104.
14	-				
15	Royalties				
16	Occupancy				
	Travel	30,547.	16,625.	11,718.	2,204.
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				1 510
19	Conferences, conventions, and meetings	16,966.	8,769.	6,687.	1,510.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	27,508.		27,508.	
23	Insurance				** * 3.12 . 23.0
	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
2	MER REIMBURSEMENT	172,782.	107,535.	65,247.	
	PROPERTY TAXES	21,736.		21,736.	
	BUILDING MAINTAINANCE	19,948.		19,948.	
	INTEREST	19,606.		18,826.	780.
	UTILITIES	18,724.		18,724.	
		156,274.	47,617.		17,295.
	All other expenses	2,633,495.	1,820,975.		67,273.
_25	Total functional expenses. Add lines 1 through 24f	2,000,490.	1,020,510.	,	, , , , , , , , , , , , , , , , , , , ,
26	Joint costs. Check here   SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				Form <b>990</b> (2010)
BAA					FORTH <b>990</b> (2010)

Part X Balance Sheet (B) (A) End of year Beginning of year 120,095. 61,377. 1 Cash — non-interest-bearing..... 2 3 3 Pledges and grants receivable, net ..... 4 4 Accounts receivable, net ..... Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L..... 5 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 7 Notes and loans receivable, net ..... 8 8 Inventories for sale or use..... 9,225. 11,655. 9 9 Prepaid expenses and deferred charges..... 10a Land, buildings, and equipment: cost or other basis.
Complete Part VI of Schedule D..... 10a 1,412,136. 319,693. 1,092,443. 353,201 10 c 1,414,015. 11 1,626,704. 12 Investments – other securities. See Part IV, line 11..... 12 13 13 Investments – program-related. See Part IV, line 11..... 14 22,045. 15 15,850. 15 Other assets, See Part IV, line 11..... 1,862,293. 2,091,567. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) ..... 42,624. 31,588. 17 Accounts payable and accrued expenses..... 17 18 Grants payable ..... 18 19 19 Deferred revenue..... 20 20 Tax-exempt bond liabilities..... 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D.......... Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 23 Secured mortgages and notes payable to unrelated third parties..... 24 Unsecured notes and loans payable to unrelated third parties..... 166,187. Other liabilities. Complete Part X of Schedule D..... 203,803. 25 208,811. 235,391 26 Total liabilities. Add lines 17 through 25..... Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34. 1,439,196. 27 1,649,281. ASSETS Unrestricted net assets..... 27  $\overline{23}3,475.$ 187,706. 28 Temporarily restricted net assets ..... 29 Permanently restricted net assets..... O R Organizations that do not follow SFAS 117, check here 🕨 and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds..... 31 31 Paid-in or capital surplus, or land, building, or equipment fund..... 32 Retained earnings, endowment, accumulated income, or other funds..... 32 1,882,756. 1,626,902 33 33 Total net assets or fund balances..... 1,862,293. 2,091,567. 34 34 Total liabilities and net assets/fund balances.....

BAA

Form 990 (2010) INTERACT MINISTRIES, INC.	-0004361	Pa	age 12				
Part XI Reconciliation of Net Assets							
Check if Schedule O contains a response to any question in this Part XI	<u></u>	<u></u>	X				
	1 1						
1 Total revenue (must equal Part VIII, column (A), line 12)	. 1	2,772,9					
2 Total expenses (must equal Part IX, column (A), line 25)	. 2	2,633,4					
3 Revenue less expenses. Subtract line 2 from line 1	. 3	139,4 1,626,9					
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))							
5 Other changes in net assets or fund balances (explain in Schedule O) SEESCHEDULE . 0	. 5	116,3	<u> 355.</u>				
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)).	. 6	1,882,	756.				
Part XII Financial Statements and Reporting							
Check if Schedule O contains a response to any question in this Part XII	<u> </u>	<u></u>	;↓↓↓				
	,	Yes	No				
1 Accounting method used to prepare the Form 990: Cash X Accrual Other							
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.							
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X				
b Were the organization's financial statements audited by an independent accountant?		2b X	—				
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of review, or compilation of its financial statements and selection of an independent accountant?	the audit,	2c X	0.00				
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			· · · · · · · · · · · · · · · · · · ·				
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were iss separate basis, consolidated basis, or both:	ued on a						
X Separate basis Consolidated basis Both consolidated and separate basis							
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?		3a	X				
<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the re or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired audit	3b					
BAA		Form <b>990</b>	(2010)				

# SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Employer identification number 92-6004561 INTERACT MINISTRIES, INC.

art	-5	Reason for Publ	ic Charity Status	(All organizations	<u>must c</u>	omple	<u>te this</u>	part.)	See ir	struction	ons.	
he o	rga	nization is not a priva	te foundation because	e it is: (For lines 1 throu	ugh 11, d	check o	nly one l	oox.)				
1	$\Box$	A church, convention	of churches or assoc	ciation of churches desc	ribed in	section	170(b)(	1 <b>)(</b> A)(i).				
2	П	A school described in	section 170(b)(1)(A)	(ii). (Attach Schedule E	Ξ.)							
3	П	A hospital or a coope	erative hospital servic	e organization describe	d in sec	tion 170	(b)(1)(A	)(iii).				
4	П	A medical research of	organization operated	in conjunction with a h	ospital d	escribe	d in sect	ion 170	(b)(1)(A	<b>)(iii)</b> . En	ter the hos	pital's
		name, city, and state	:									
5		An organization oper 170(b)(1)(A)(iv). (Con	ated for the benefit o mplete Part II.)	f a college or university					nmental	unit des	scribed in s	ection
6 7		An organization that in section 170(b)(1)(4)	normally receives a s <b>4)(vi).</b> (Complete Par		pport fro	om a go	<b>70(b)(1)</b> vernmer	(A)(v). ital unit	or from	the gen	eral public	described
A community trust described in <b>section 170(b)(1)(A)(vi)</b> . (Complete Part II.)  X An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gro												
9	X	investment income a June 30, 1975. See s	nd unrelated businessection 509(a)(2). (Col	s taxable income (less : mplete Part III.)	section 5	511 tax)	from bu	sinesse	s acqui	rship fee 1/3% of i red by th	es, and gros ts support ne organiza	ss receipts from gross tion after
10		An organization orga	nized and operated e	xclusively to test for pu	ıblic safe	ty. See	section	509(a)(	4).			
11		•		xclusively for the benef cribed in section 509(a tion and complete lines		,	11 6	10	c	ry out th 609(a)(3).	oricon un	o Don that
		a Type I	<b>b</b>   Type II	<b>c</b>   Type	l — Func	tionally	integrat	ed		a 🔲	type III	Otner
е			, I certify that the org n managers and othe	anization is not controll r than one or more pub	led direc licly sup	tly or in ported o	directly organiza	by one o tions de	or more scribed	disquali in sectio	fied person on 509(a)(1	s ) or
f		If the organization re	ceived a written dete	rmination from the IRS	that is a	Type I	Type II	or Type	e III sup	porting o	organization	n,
~		Since August 17 200	06 has the organizati	on accepted any gift o	r contrib	ution fro	om any o	of the fo	llowing	persons	?	
g												Yes No
		(i) A person who	directly or indirectly o	ontrols, either alone or	together	with pe	ersons d	escribed	in (ii)	and (iii)	11g (i)	
		below, the gove	erning body of the su	pported organization (							11g (ii)	
		(ii) A family memb	er of a person descri	bed in (i) above?							11g (iii)	
		(iii) A 35% controlle	ed entity of a person	described in (i) or (ii) a	pove (						118 (111)	<del></del>
<u>h</u>		Provide the following	information about th	e supported organization	1		1			.,	6-85 6	
		(i) Name of supported organization	(ii) EiN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz column (i your go	s the ation in it is the in it is in it is the in it is the in it is it is the in it is it	the organ column your st	n (i) of	organiz colur	s the ation in nn (i) ed in the 5.?	(VII) Amour	t of support
					Yes	No	Yes	No	Yes	No		
A)									<u>.</u>			<del> </del>
									!			
B)					ļ							
C)									-			
D)					<u> </u>							
				de la companya de la							<u>:</u>	
E)												-
Cotal	1			[4] 中央第二十四十四十四十四十四十四十四十四十四十四十四十四十四十四十四十四十四十四十四	1		1 55	1	N. 4	35.50		

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

Schedule A (Form 990 or 990-EZ) 2010

## 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.)

			<del></del>				
Sec	tion A. Public Support	ı	<del></del>				
Caleı begir	ndar year (or fiscal year nning in) ►	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2010	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include 'unusual grants.')						
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.						
3	The value of services or facilities furnished by a governmental unit to the organization without charge	,					
4	<b>Total.</b> Add lines 1 through 3		uliar lucerosal are especial en abr	Dan January (n. 1884)	Marchall Control States		
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					т	
Cale: begii	ndar year (or fiscal year nning in) ►	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2010	(f) Total
7	Amounts from line 4				<u> </u>	<u> </u>	
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.						n.u
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)					59章 - 八、臺灣家(11752)雄多。	
11	Total support. Add lines 7 through 10						
	Gross receipts from related activ		•				
	First five years. If the Form 990 organization, check this box and	stop nere	<u> </u>	nd, third, fourth,	or fifth tax year a	s a section 501(c)(	(3) ▶ □
Sec	tion C. Computation of Pu	ıblic Support F	Percentage			14	%
14	Public support percentage for 20	010 (line 6, colum	n (f) divided by lit	ne II, column (†)	y	15	%
15	Public support percentage from	2009 Schedule A	, Part II, line 14			22.1/20/	
	33-1/3% support test – 2010. If and stop here. The organization	i quaimes as a pu	Diciy Supported C	nganization			
	33-1/3% support test — 2009. If and stop here. The organization	i quaimes as a pu	blicly supported c	ngamzation	. , ,		
	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'fact	s-and-circumstan	ces' test. The org	anization qualifie	s as a publicly su	pported organizati	on ► [_]
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-ar	meets the Tacts- nd-circumstances	test. The organi	zation qualifies a	s a publicly suppo	orted organization.	
18	Private foundation. If the organ	iization did not ch	eck a box on line	13, 16a, 16b, 17	a, or 1/b, check t	his box and see in	990 or 990-EZ) 2010
BAA					5	chequie A (Form S	750 01 750-EZ) 2010

## 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.)

Section A, Public Support		to qualify under the tests I	isted below, prode	o complete	<del></del>			
Calcular year (or fired) y heigning in   Ga) 2005   Gb) 2007   Ga) 2008   Gb) 2009   Gb) 2009   Gb) 2009   Gb) 2009   Gb) 2001   Gb) 1000   G	Sec	tion A. Public Support						
Content   Cont			(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2010	(f) Total
and nicrobardup (essue) and ni		Gifts grants contributions	(4)-111		~~~			
Any Virticistic grant part of the first provided in the contraction of a part of the first provided in the contraction of the first provided on the first provi	-	and membership fees						10 017 000
2 Gross receipts from admissions, merchandrase sold on covinces performed, or facilities for the programments and covered the organizations and covered the organizations and covered the purpose of the organizations benefit and editor purpose or business under section 513, 424, 596.  3 Tax revenues leved for the organizations benefit and editor purpose organizations benefit and editor organizations benefit and editor purpose organizations benefit and editor purpose organizations benefit and editor purpose organizations benefit and editor purpose organizations benefit and editor organization editor organization organization editor organization editor organization organizatio		any 'unusual grants.')	2,623,000.	2,684,250.	2,599,776.	2,658,256.	2,452,651.	13,017,933.
sions, merchandises sold or services performed, or isabilities related to the organizations of the company purpose.  78, 666. 79, 102. 65, 684. 98, 874. 84, 337. 406, 663.  3 Gross receipts from activities that our end an unrelated treated that our end an unrelated treated that our end an unrelated treated to incompany purpose.  78, 666. 79, 102. 65, 684. 98, 874. 84, 337. 406, 663.  4 Tax revenues levied for the organization's benefit and either pard to or expended on its behalf.  5 treatiles furnished by a governmental unit to the organization without change.  6 Total, Add lines I through 5. 2, 701, 666. 2, 763, 352. 2, 665, 460. 2, 757, 130. 2, 536, 988. 13, 424, 596.  78 Amounts included on lines 2, 2, 701, 666. 2, 763, 352. 2, 665, 460. 2, 757, 130. 2, 536, 988. 13, 424, 596.  8 Amounts included on lines 2 and 3 received from other than disqualified persons that oxocod the greater of \$5,000 or 100 or	2				-			
Services performed, or facilities turnished in any activity that is take exempt purpose a continuous purpose in the services performed in any activity that is take exempt purpose a continuous purpose in the services performed in the services performe	~	sions, merchandise sold or					,	
related to the organization's tax-exemple purpose. 78, 666. 79,102. 65,684. 98,874. 84,337. 406,663. 36-205 receipts from activities or business under section 513. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		services performed, or facilities						
3 Gross recipils from activities that are not an unrelated trade or business under section 13.  3 Gross recipils from activities that are not an unrelated trade or business under section 13.  4 organization's benefit and either paid to or expended on its behalt.  5 The little for the property of the p								406 660
3 Gross receipts from activities that are not an unrelated trade or business under section 513.  1 Tax revenues levide for the effect paid to or expanded on its behalf.  5 The value of services or sections are serviced on its behalf.  5 The value of services or sections are serviced on its behalf.  5 The value of services or sections are serviced on its behalf.  6 Total, Add lines I through 5.  7 A Amounts included on lines 1, 2, and 3 received from discreting the services of the service		fax-exempt purpose	78,666.	79 <u>,</u> 102.	65,684.	98,874.	84,337.	406,663.
that are not an unrelated frade or business surder section 513.  4 Tax revenues levied for the earth of the e	3	Gross receipts from activities	-					
organization's benefit and either part to or expended on lether part to or expended on either part to or expended on the behalf.  5 to behalf.  5 to behalf.  5 to behalf.  5 to behalf.  6 Total. Add lines 1 through 5.  7 a Amounts included on lines 1.  2, and 3 received from disqualified persons.  6 D Amounts included on lines 1.  2, and 3 received from disqualified persons.  6 D Amounts included on lines 2.  8 Public support (subtract line 7. from line 6.  8 Public support (subtract line 7. from line 6.  9 Amounts from line 6.  8 Public support (subtract line 7. from line 6.  9 Amounts from line 6.  9 Amounts from line 6.  9 Amounts from line 6.  10 Gross income from interess, royalties and included business taxable and on securities boars, rents, royalties and included in line 10, which are not behalf seed and sources and sources.  15 to 8 49, 928. 66, 566. 268, 616. 206, 039. 742, 984.  10 Investment from urrelated business availate and included in line 10, whother or not the business is availate and included in line 10, whother or not the business is availate applicate seases (Explain 1) (application of public support (subtract line 7. from line 6.)  10 Chert income. Do not include from 100, line 100, whother or not the business is availate applicate seases (Explain 1) (application of public support (subtract line 10, whother or not the business is availate applicate seases (Explain 1) (application of public support (subtract line 10, whother or not the business is availated in line 10, whother or not the business is availated applicated seases (Explain 1) (application of Public Support (subtract line 10, subtract line 10, whother or not the business is availated in line 10, whother or not the business availated in line 10, whother or not the business are subtracted business availated in line 10, whother or not the business in line 10, whother or not the business are subtracted business ar		that are not an unrelated trade			.ru			0.
Calculate year of fiscal yr beginned in the Service of Section B. Total Support (Subtract line Service of Section B. Total Support (Service of Service o	4	Tax revenues levied for the						
5 The value of services or facilities turnished by a governmental unit to the programmental units to the programmen		either paid to or expended on						0.
facilities furnished by a governmental unit to thrage or governmental unit to through 5.  7a Amounts included on lines 1, 2, and 3 received from other thragen or governmental unit to the governmental units to the governmental un	5	The value of services or						
organization without charge.  6 Total. Add lines 1 through 5.  7a Amounts included on lines 1, 2, and 3 received from other than disqualified persons.  9 Amounts included on lines 2, and 3 received from other than disqualified persons.  9 Amounts included on lines 2, and 3 received from other than disqualified persons.  9 Amounts included on lines 2, and 3 received from other than disqualified persons.  9 Amounts included on lines 2, and 3 received from other than disqualified persons.  9 Amounts included on lines 2, and 3 received from other than disqualified persons.  9 Amounts included on line 3 on 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0,	_	facilities furnished by a						
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Total. And lines 1 through   2,701,000   2,703,000   0, 0   0,	_	•	2 701 666	2 763 352	2 665 460	2.757.130.	2.536.988.	13,424,596.
2, and 3 received from disqualified persons 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.			2, 101,000.	2,103,332.	2,000,400.	2,101,100.		
De 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.  Section B. Total Support  Calendar year (or fiscal yr beginning in)    9. Amounts from line 6.  Section B. Total Support  Calendar year (or fiscal yr beginning in)    9. Amounts from line 6.  2, 701, 666. 2, 763, 352. 2, 665, 460. 2, 757, 130. 2, 536, 988. 13, 424, 596.  Section B. Total Support  Calendar year (or fiscal yr beginning in)    9. Amounts from line 6.  2, 701, 666. 2, 763, 352. 2, 665, 460. 2, 757, 130. 2, 536, 988. 13, 424, 596.  Section B. Total Support  Calendar year (or fiscal yr beginning in)    9. Amounts from line 6.  2, 701, 666. 2, 763, 352. 2, 665, 460. 2, 757, 130. 2, 536, 988. 13, 424, 596.  Section B. Total Support  Calendar year (or fiscal yr beginning in)    9. Amounts from line 18.  9. Amounts from line 18.  10. Calendar year (or fiscal yr beginning in)    2, 701, 666. 2, 763, 352. 2, 665, 460. 2, 757, 130. 2, 536, 988. 13, 424, 596.  Section B. Total Support terceived on securities loans, rents, royalites and income from securities loans, rents, rents, royalites and income from securities loans, rents, rent	7 a	Amounts included on lines I,	ļ			_	_	
Description		disqualified persons	0.	0.	0.	0.	0.	<u> </u>
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.  2. Add lines 7a and 7b.  3. Public support (Subtract line 7c from line 5).  5. Section B. Total Support  Calendar year (or fiscal y beginning in) Portion 10 for 10	h		-		ľ	ļ		
excised the greater of \$5,000 or 1% of the amount on line 13								Ì
1% of the amount on line 13		disqualified persons that		<u> </u>				
C Add lines 7a and 7b.		exceed the greater of \$5,000 or					_	
C Add lines 7a and 7b.			0.	0.	0.			
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Section B. Total Support   Calendar year (or fiscal by beginning in) *			A CONTRACTOR OF THE STREET	1. 数据建2.75平底7度2.7度3.		176544-7-5190		
Section B. Total Support   Calendar year (or fiscal by beginning in) *   Calendar year (or fiscal by beginning i	8	7c from line 6.)				<b>一种</b>		13,424,596.
Calendar year (or fiscal yr beginning in)	Sec							
Amounts from line 6.			(-) 000C	4.2.0007	(4) 2008	(d) 2009	(e) 2010	(f) Total
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dividends, payments received on securities loans, rents, received on securities loans, rents, royalties and income from similar sources.  151,835. 49,928. 66,566. 268,616. 206,039. 742,984.  b Urrelated business taxable income (less section 511 taxes) from businesses acquirred after June 30, 1975.  c Add lines 10a and 10b								
on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b	9	Amounts from line 6						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b	9	Amounts from line 6						
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income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b	9	Amounts from line 6	2,701,666.	2,763,352.	2,665,460.	2,757,130.	2,536,988.	13,424,596.
taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b.  151, 835. 49, 928. 66, 566. 268, 616. 206, 039. 742, 984.  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV). SEE PART. IV.  13 Total support. (Add line 3, 10c, 11, and 12) 2, 960, 848. 2, 787, 494. 2, 446, 839. 3, 471, 987. 2, 889, 349. 14, 556, 517.  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) project (Computation of Public Support Percentage  15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)). 15 92.2 %  16 Public support percentage from 2009 Schedule A, Part III, line 15. 16 93.8 %  Section D. Computation of Investment Income Percentage  17 Investment income percentage from 2009 Schedule A, Part III, line 17. 18 4.1 %  18 Investment income percentage from 2009 Schedule A, Part III, line 17. 18 4.1 %  19 a 33-1/3% support tests – 2010. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 313/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.	9 10 a	Amounts from line 6	2,701,666.	2,763,352.	2,665,460.	2,757,130.	2,536,988.	13,424,596.
acquired after June 30, 1975.  c Add lines 10a and 10b	9 10 a	Amounts from line 6	2,701,666.	2,763,352.	2,665,460.	2,757,130.	2,536,988.	13,424,596.
C Add lines 10a and 10b	9 10 a	Amounts from line 6	2,701,666. 151,835.	2,763,352.	2,665,460.	2,757,130.	2,536,988.	742,984.
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Part IV.) SEE PART IV. 107, 34725,786285,187. 446,241. 146,322. 388,937.  13 Total support. (Add ins 9, 10c, 11, and 12.) 2,960,848. 2,787,494. 2,446,839. 3,471,987. 2,889,349. 14,556,517.  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  Section C. Computation of Public Support Percentage  15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)). 15 92.2 %  16 Public support percentage from 2009 Schedule A, Part III, line 15 16 93.8 %  Section D. Computation of Investment Income Percentage  17 Investment income percentage from 2009 Schedule A, Part III, line 17 18 Investment income percentage from 2009 Schedule A, Part III, line 17 18 33-1/3% support tests - 2010. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.    18 Investment income percentage from 2009 Schedule A, Part III, line 17 18 18 18 19.3-1/3% support tests - 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.    20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.	9 10 a	Amounts from line 6	2,701,666. 151,835.	2,763,352. 49,928.	2,665,460. 66,566.	2,757,130.	2,536,988.	742,984. 0. 742,984.
Total support. (Add Ins. 9, 10s, 11, and 12.) 2, 960, 848. 2, 787, 494. 2, 446, 839. 3, 471, 987. 2, 889, 349. 14, 536, 517.  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  Section C. Computation of Public Support Percentage  15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)). 15 92.2 %  16 Public support percentage from 2009 Schedule A, Part III, line 15 16 93.8 %  Section D. Computation of Investment Income Percentage  17 Investment income percentage from 2009 Schedule A, Part III, line 17 18 Investment income percentage from 2009 Schedule A, Part III, line 17 18 Investment income percentage from 2009 Schedule A, Part III, line 17 18 Investment income percentage from 2009 Schedule A, Part III, line 17 In is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. In line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. In line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. In line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. In line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. In line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. In line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. In line 18 is n	9 10 a E	Amounts from line 6	2,701,666. 151,835.	2,763,352. 49,928.	2,665,460. 66,566.	2,757,130.	2,536,988.	742,984. 0. 742,984.
Total support. (Add Ins. 9, 10s, 11, and 12.) 2, 960, 848. 2, 787, 494. 2, 446, 839. 3, 471, 987. 2, 889, 349. 14, 536, 517.  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  Section C. Computation of Public Support Percentage  15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)). 15 92.2 %  16 Public support percentage from 2009 Schedule A, Part III, line 15 16 93.8 %  Section D. Computation of Investment Income Percentage  17 Investment income percentage from 2009 Schedule A, Part III, line 17 18 Investment income percentage from 2009 Schedule A, Part III, line 17 18 Investment income percentage from 2009 Schedule A, Part III, line 17 18 Investment income percentage from 2009 Schedule A, Part III, line 17 In is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. In line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. In line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. In line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. In line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. In line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. In line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. In line 18 is n	9 10 a E	Amounts from line 6	2,701,666. 151,835. 151,835.	49,928. 49,928.	66,566. 66,566.	268,616.	2,536,988.	742,984. 0. 742,984.
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  15 Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f)).  16 Public support percentage from 2009 Schedule A, Part III, line 15.  Section D. Computation of Investment Income Percentage  17 Investment income percentage from 2009 Schedule A, Part III, line 17.  18 Investment income percentage from 2009 Schedule A, Part III, line 17.  19a 33-1/3% support tests — 2010. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.  b 33-1/3% support tests — 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.  20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.	9 10 a E	Amounts from line 6	2,701,666. 151,835. 151,835.	49,928. 49,928. -25,786.	2,665,460. 66,566. 66,566.	2,757,130. 268,616. 268,616. 446,241.	2,536,988. 206,039. 206,039.	13,424,596. 742,984. 0. 742,984. 0. 388,937.
Section C. Computation of Public Support Percentage	9 10 a 11	Amounts from line 6	2,701,666. 151,835. 151,835. 107,347. 2,960,848.	2,763,352. 49,928. 49,928. -25,786. 2,787,494.	2,665,460. 66,566. 66,566. -285,187. 2,446,839.	2,757,130. 268,616. 268,616. 446,241. 3,471,987.	2,536,988. 206,039. 206,039. 146,322. 2,889,349.	13,424,596. 742,984. 0. 742,984. 0. 388,937. 14,556,517.
Section C. Computation of Public Support Percentage	9 10 a 11	Amounts from line 6	2,701,666. 151,835. 151,835. 107,347. 2,960,848.	2,763,352. 49,928. 49,928. -25,786. 2,787,494.	2,665,460. 66,566. 66,566285,187. 2,446,839.	2,757,130.  268,616.  268,616.  446,241. 3,471,987.  or fifth tax year a	2,536,988. 206,039. 206,039. 206,039. 206,322. 2,889,349. s a section 501(c)	13,424,596. 742,984. 0. 742,984. 0. 388,937. 14,556,517.
Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	9 10 a k	Amounts from line 6	2,701,666.  151,835.  151,835.  107,347.  2,960,848.  Distor the organizatop here.	2,763,352. 49,928. 49,928. -25,786. 2,787,494. zation's first, second	2,665,460. 66,566. 66,566285,187. 2,446,839.	2,757,130.  268,616.  268,616.  446,241. 3,471,987.  or fifth tax year a	2,536,988. 206,039. 206,039. 206,039. 206,322. 2,889,349. s a section 501(c)	13,424,596. 742,984. 0. 742,984. 0. 388,937. 14,556,517.
Public support percentage from 2009 Schedule A, Part III, line 15	9 10 a k	Amounts from line 6	2,701,666.  151,835.  151,835.  107,347.  2,960,848.  is for the organizatop here	2,763,352.  49,928.  49,928.  -25,786. 2,787,494.  zation's first, second	2,665,460. 66,566. 66,566285,187. 2,446,839. nd, third, fourth,	2,757,130.  268,616.  268,616.  446,241.  3,471,987.  or fifth tax year a	2,536,988. 206,039. 206,039. 206,039. 206,322. 2,889,349. s a section 501(c)	13,424,596.  742,984.  0.  742,984.  0.  388,937.  14,556,517.
Section D. Computation of Investment Income Percentage   17   Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	9 10 a 11 12 13 14 Sec	Amounts from line 6	2,701,666.  151,835.  151,835.  107,347.  2,960,848.  is for the organizatop here	2,763,352.  49,928.  49,928.  -25,786. 2,787,494.  zation's first, second	2,665,460. 66,566. 66,566285,187. 2,446,839. nd, third, fourth,	2,757,130.  268,616.  268,616.  446,241.  3,471,987.  or fifth tax year a	2,536,988. 206,039. 206,039. 206,039. 206,322. 2,889,349. s a section 501(c)	13,424,596.  742,984.  0.  742,984.  0.  388,937.  14,556,517.  (3)  92.2 %
Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	9 10 a 11 12 13 14 Sec 15	Amounts from line 6	2,701,666.  151,835.  151,835.  107,347. 2,960,848. Dis for the organizatop here.  1051,835.	2,763,352.  49,928.  49,928.  49,928.  2,787,494.  2ation's first, second percentage and (f) divided by I	2,665,460. 66,566. 66,566285,187. 2,446,839. nd, third, fourth,	268,616.  268,616.  268,616.  446,241. 3,471,987. or fifth tax year a	2,536,988. 206,039. 206,039. 206,039. 146,322. 2,889,349. s a section 501(c)	13,424,596.  742,984.  0.  742,984.  0.  388,937.  14,556,517.  (3)  92.2 %
Investment income percentage for 2010 (line 10t, column (r) divided by line 15.  Investment income percentage from 2009 Schedule A, Part III, line 17.  19a 33-1/3% support tests — 2010. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.  b 33-1/3% support tests — 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.  20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.	9 10 a 11 12 13 14 Sec 15 16	Amounts from line 6	2,701,666.  151,835.  151,835.  151,835.  107,347.  2,960,848.  is for the organized stop here.  1010 (line 8, column 2009 Schedule A	2,763,352.  49,928.  49,928.  49,928.  25,786.  2,787,494.  zation's first, second control of divided by Internal Part III, line 15	2,665,460. 66,566. 66,566285,187. 2,446,839. nd, third, fourth,	268,616.  268,616.  268,616.  446,241. 3,471,987. or fifth tax year a	2,536,988. 206,039. 206,039. 206,039. 146,322. 2,889,349. s a section 501(c)	13,424,596.  742,984.  0.  742,984.  0.  388,937.  14,556,517.  (3)  92.2 %
19a 33-1/3% support tests — 2010. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.  b 33-1/3% support tests — 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.  20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.	9 10 a 11 12 13 14 Sec 15 16	Amounts from line 6	2,701,666.  151,835.  151,835.  151,835.  151,835.  2,960,848. 2,960,848. 3 stop here.  4 stop here.  4 stop here.  5 stop here.  5 stop here.  6 stop here.	2,763,352.  49,928.  49,928.  49,928.  25,786.  2,787,494.  2ation's first, second control of divided by Internation in the part III, line 15 me Percentage	2,665,460. 66,566. 66,566285,187. 2,446,839. nd, third, fourth,	2,757,130. 268,616. 268,616. 446,241. 3,471,987. or fifth tax year a	2,536,988. 206,039. 206,039. 206,039. 146,322. 2,889,349. s a section 501(c) 15	13,424,596.  742,984.  0.  742,984.  0.  388,937. 14,556,517.  (3)  92.2 % 93.8 %
19a 33-1/3% support tests — 2010. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33-1/3% support tests — 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	9 10 a 11 12 13 14 Sec 15 16 Sec	Amounts from line 6	2,701,666.  151,835.  151,835.  151,835.  151,835.  151,835.  107,347. 2,960,848. 0 is for the organization here. 0 is stop here. 0 is top here. 0 is stop here.	2,763,352.  49,928.  49,928.  49,928.  25,786.  2,787,494.  2ation's first, second sec	2,665,460. 66,566. 66,566285,187. 2,446,839. nd, third, fourth, ne 13, column (f) e	2,757,130.  268,616.  268,616.  446,241. 3,471,987. or fifth tax year a	2,536,988. 206,039. 206,039. 206,039. 206,039. 208,039. 146,322. 2,889,349. s a section 501(c) 15 16	13,424,596.  742,984.  0.  742,984.  0.  388,937. 14,556,517.  )(3)  ▶ □  92.2 % 93.8 %  5.1 %
b 33-1/3% support tests — 2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	9 10 a 11 12 13 14 Sec 15 16 Sec 17	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.) SEE. PART. IV.  Total support. (Add Ins 9, 10c, 11, and 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pupublic support percentage from the support percentage from the support percentage from the support percentage.	2,701,666.  151,835.  151,835.  151,835.  151,835.  151,835.  107,347. 2,960,848. 0 is for the organization here. 0 is stop here. 0 is top here. 0 is top here. 0 is top here. 0 is top here. 0 is for the organization here. 0 is top here.	2,763,352.  49,928.  49,928.  49,928.  25,786.  2,787,494.  2ation's first, second sec	2, 665, 460.  66, 566.  66, 566.  -285, 187. 2, 446, 839. and, third, fourth, ne 13, column (f) e ed by line 13, column e e 17.	268,616.  268,616.  268,616.  446,241. 3,471,987. or fifth tax year a	2,536,988.  206,039.  206,039.  206,039.  146,322. 2,889,349. s a section 501(c)  15  16	13,424,596.  742,984.  0.  742,984.  0.  388,937.  14,556,517.  0(3)  92.2 %  93.8 %  5.1 %  4.1 %
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	9 10 a 11 12 13 14 Sec 15 16 Sec 17 18 19;	Amounts from line 6	2,701,666.  151,835.  151,835.  151,835.  151,835.  151,835.  107,347.  2,960,848.  is for the organization here.  2009 Schedule Avestment Inco for 2010 (line 10c from 2009 Sched If the organization is this hox and ste	49,928.  49,928.  49,928.  49,928.  25,786. 2,787,494.  cation's first, second of divided by I in the property of the property	2,665,460. 66,566. 66,566285,187. 2,446,839. and, third, fourth, ne 13, column (f) e ed by line 13, col e 17 e box on line 14, nization gualifies	2,757,130.  268,616.  268,616.  268,616.  446,241. 3,471,987. or fifth tax year a	2,536,988.  206,039.  206,039.  206,039.  146,322. 2,889,349. s a section 501(c)  15 16  17 18 ore than 33-1/3%, ported organization	13,424,596.  742,984.  0.  742,984.  0.  388,937.  14,556,517.  0(3)  92.2 % 93.8 %  5.1 % 4.1 % and line 17 on
	9 10 a 11 12 13 14 Sec 15 16 Sec 17 18 19;	Amounts from line 6	2,701,666.  151,835.  151,835.  151,835.  151,835.  151,835.  107,347.  2,960,848.  is for the organization here.  2009 Schedule Avestment Inco for 2010 (line 10c from 2009 Sched lf the organization is this hox and ste	49,928.  49,928.  49,928.  49,928.  25,786. 2,787,494.  cation's first, second of divided by I in the property of the property	2,665,460. 66,566. 66,566285,187. 2,446,839. and, third, fourth, ne 13, column (f) e ed by line 13, col e 17 e box on line 14, nization gualifies	2,757,130.  268,616.  268,616.  268,616.  446,241. 3,471,987. or fifth tax year a	2,536,988.  206,039.  206,039.  206,039.  146,322. 2,889,349. s a section 501(c)  15 16  17 18 ore than 33-1/3%, ported organization	13,424,596.  742,984.  0.  742,984.  0.  388,937.  14,556,517.  0(3)  92.2 % 93.8 %  5.1 % 4.1 % and line 17 on

Schodula A	(Form 990 or 990-EZ) 2010	INTERACT	MINISTRIES,	INC.	92-6004561	Page 4
Part IV	Supplemental Informa Part II, line 17a or 17b	ation. Completo; and Part III,	e this part to p line 12. Also c	rovide the explanatio complete this part for	ns required by Part II, line any additional information	10;
	(See instructions).					
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2010

# SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

CLIENT G507

#### INTERACT MINISTRIES, INC.

92-6004561

## PART III, LINE 12 - OTHER INCOME

NATURE AND SOURCE	2010	2009	2008	2007	2006
OTHER INCOME UNREALIZED GAIN (LOSS) REALIZED GAIN (LOSS) TOTAL	29,967. 116,355. \$ 146,322. \$	374. 220,273. 225,594. 446,241.	579. -304,392. 18,626. \$ -285,187.	1,003. -35,960. 9,171. \$ -25,786. \$	80,866. 26,481. 107,347.

#### SCHEDULE D (Form 990)

Department of the Treasury Name of the organization

#### Supplemental Financial Statements

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

OMB No. 1545-0047

Open to Public Inspection :

Employer identification number

92-6004561 INTERACT MINISTRIES, INC Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds 1 Total number at end of year..... 2 Aggregate contributions to (during year)..... Aggregate grants from (during year)...... Aggregate value at end of year..... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?..... Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a a Total number of conservation easements.... **b** Total acreage restricted by conservation easements ..... 2b 2c c 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 ..... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ► Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year **►**\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section Nο 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV. line 8. 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (ii) Assets included in Form 990, Part X..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1..... **b** Assets included in Form 990, Part X..... **►**\$

Part III   Organizations Maintai									
3 Using the organization's acquisiting items (check all that apply):	on, accession	, and other reco	-			at are a significant ι	ise of its	s collec	tion
a Public exhibition		ď	4	exchange prog		•			
b Scholarly research		e [_	Other						<del>-</del>
c Preservation for future genera		_				V 1	1_		
4 Provide a description of the organ Part XIV.							se in		
5 During the year, did the organizat assets to be sold to raise funds re	tion solicit or ather than to	receive donation be maintained a	ns of art, as part of	historical treasu the organization	ires, or o n's collec	ther similar	Yes		No
Part IV Escrow and Custodial 9, or reported an amou	Arrangem unt on Forn	ents. Compl n 990, Part X	ete if or (, line 2	rganization ai 1.	nswere	d 'Yes' to Form S	90, Pa	art IV,	line 
1 a Is the organization an agent, trus included on Form 990, Part X?					or other	assets not	Yes		No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV a	nd complete the	e followin	g table:					
							Amoun	<u>t</u>	
c Beginning balance									
d Additions during the year						1 d			
e Distributions during the year						<u>1e</u>			
f Ending balance						1f			٦
2a Did the organization include an a	mount on For	m 990, Part X,	line 21? .				∐ Yes	Ĺ	No
b If 'Yes,' explain the arrangement	in Part XIV.			1.57 (1		000 D. 4 IV/ E-	- 10		
Part V Endowment Funds. Co		1		vered Yes to	o Form	990, Part IV, line			
ļ	(a) Current	year (b)	Prior year	(c) Two yea	ars back	(d) Three years back	(e)	Four year	s dack
1 a Beginning of year balance								<b>Frankli</b> Androvel	
<b>b</b> Contributions						Control of the contro		va 45.0g Liberari	Meglatinu. Markata ka
c Net investment earnings, gains, and losses									
d Grants or scholarships						a de Tenesia		<b>15</b> -3.4	
e Other expenditures for facilities and programs							e di Carl		ne ető nik faró
f Administrative expenses									
g End of year balance						The state of the contract of the state of th			推翻
2 Provide the estimated percentage	e of the year	end balance hel	d as:						
a Board designated or quasi-endow	vment ►	%							
b Permanent endowment ►	%								
c Term endowment 🛌	%								
3a Are there endowment funds not i	n the possess	sion of the orgai	nization tl	hat are held and	d adminis	stered for the	1		1
organization by:							[a (i)	Yes	No
(i) unrelated organizations							3a(i)		<del> </del>
(ii). related organizations							3a(ii)		-
b If 'Yes' to 3a(ii), are the related of					· · · · · · · · ·		. 3b		<u> </u>
4 Describe in Part XIV the intended									
Part VI Land, Buildings, and I								n ,	
Description of investment		(a) Cost or othe (investmer	nt)	(b) Cost or oth basis (other)		(c) Accumulated depreciation	(d)	Book va	
1 a Land		164,			1, 4,	1 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			<u>,270.</u>
<b>b</b> Buildings		1,093,	756.			971,535.		122	<u>,221.</u>
c Leasehold improvements						45- 45-			
<b>d</b> Equipment		154,	110.			120,908.		33	,202.
e Other								<b>A</b>	
Total. Add lines 1a through 1e (Colum	n (d) must eq	ual Form 990, F	Part X, co	lumn (B), line 1	0(c).)	· · · · · · · · · · · · · · · · · · ·			<u>,693.</u>
ВАА						Sche	dule <b>D</b> (	Form 99	90) 2010

Part VII Investments—Other Securities. See Fo	orm 990, Part X, line	e 12. N/A	
(a) Description of security or category (including name of security)	(b) Book value	<b>(c)</b> Method of valuat Cost or end-of-year mar	ion: ket value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			···
(C)			
(D)			
(E)			
<u>(F)</u>			
<u>(G)</u>			
<u>(H)</u>			
_()		· · · · · · · · · · · · · · · · · · ·	or Turning of The Control
Tetal. (Column (b) must equal Form 990 Part X, column (B) line 12.)	Form 000 Part Y Jir	ne 13) N/A	ALD, 1 - 1 (dec 1999-200)   4   5   - 1   1   1   1009-10   1034
Part VIII Investments-Program Related. (See	(b) Book value	(c) Method of valua	lion:
(a) Description of investment type	(b) Book value	Cost or end-of-year mar	ket value
(1)			
(2)			
(3)		A	
(4)			
(5)			
(6)			
(7)			
(8)			, <u>,,, , , , , , , , , , , , , , , , , ,</u>
(9)			
Total. (Column (b) must equal Form 990, Part X. column (B) line 13.).	Š.	《新聞稿》是達城龍樹。 网络海绵	
Part IX Other Assets. (See Form 990, Part X,	line 15) N/A		
	scription		(b) Book value
(1)			
(2)			
(3)			
(4)			<u> </u>
(5)			
(6)			
(7)	····	- Auto-	
(8)			
(9)			
(10)  Total. (Column (b) must equal Form 990, Part X, column(E)	2) lino 15)	<b>&gt;</b>	
Part X Other Liabilities. (See Form 990, Part	X line 25)	***************************************	<u> </u>
(a) Description of liability	(b) Amount		
(1) Federal income taxes			
(2) GIFT ANNUITY OBLGATIONS	40,314		
(3) REVOCABLE TRUSTS	24,500		
(4) UNITRUST LIABILITIES	101,373		
(5)			
(6)			
(7)		그런 공개를 한 사용하는 이것들은	
(8)			
(9)		그렇지 않았다고 있었는 그 남편화	
(10)			요
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	▶ 166,187	7 <u>- 1944 - Hawa - Marie Indonesia - Indo</u>	<u> </u>

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).

Sch	edule D (Form 990) 2010 INTERACT MINISTRIES, INC.	92-6004561	Page 4
Pa	t XIII Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements	· · · · · · · · · · · · · · · · · · ·	
1	Total revenue (Form 990, Part VIII,column (A), line 12)		2,772,994.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2,633,495.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		139,499.
4	Net unrealized gains (losses) on investments.		116,355.
5	Donated services and use of facilities	.,	
6	Investment expenses	·	
7	Prior period adjustments	. , <u>L</u>	
8	Other (Describe in Part XIV)		
9	Total adjustments (net). Add lines 4 through 8		<u>116,355.</u>
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9.		255,854.
Pai	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	per Return	
1	Total revenue, gains, and other support per audited financial statements.		2,772,994.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	Net unrealized gains on investments	Tac Mil 1/ 13/1920/4	
	Donated services and use of facilities		
	Recoveries of prior year grants		
	Other (Describe in Part XIV).		
	Add lines 2a through 2d.	2e	
	Subtract line 2e from line 1.	3 2	2,772,994.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i i i i i i i i i i i i i i i i i i i	
	Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Bort XIV.)		
ŀ	Other (Describe in Part XIV.)	4c	
	: Add lines 4a and 4b	5	2,772,994.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		<u> </u>
Pai	Total expenses and losses per audited financial statements	1	2,633,495.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	Donated services and use of facilities		
	Filor year adjustments	2000	
	Ottel losses		
•	Other (Describe in Fait Arv.)		
	Add lines 2a through 2d.	3	2,633,495.
3	Subtract line 2e from line 1.		2,000,100.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Factory)	4c	
	Add lines <b>4a</b> and <b>4b</b>		2,633,495.
	t XIV Supplemental Information		
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4 V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also additional information.	; Part IV, lines 1b and complete this part to	I 2b; provide

92-6004561

Page 4

Schedule D (Form 990) 2010 INTERACT MINISTRIES, INC.	92-6004561	Page 5
Schedule D (Form 990) 2010 INTERACT MINISTRIES, INC.  Part XIV   Supplemental Information (continued)	<u> </u>	
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Schedule **D** (Form 990) 2010

# Schedule F (Form 990)

## Statement of Activities Outside the United States

OMB No. 1545-0047 2010

Department of the Treasury Internal Revenue Service

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization

Employer identification number

92-6004561

INI	ERACT MINISTRIES,	INC.				92-60045	61
Par	t General Informat to Form 990, Part	ion on Activition IV, line 14b.	es Outside the	e United St	ates. Complet	e if the organization	n answered 'Yes'
1	For grantmakers. Does the grantees' eligibility for the	e organization mai grants or assistan	ntain records to s ce, and the selec	substantiate t tion criteria u	he amount of the ised to award the	grants or assistance, the grants or assistance?	e X Yes No
2	For grantmakers. Describe	in Part V the org	anization's proce	dures for moi	nitoring the use of	grant funds outside the	United States.
3	Activities per Region. (The	following Part I, I	ine 3 table can be	e duplicated i	f additional space	is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	region (l fundrais services grants	es conducted in by type) (e.g., ing, program investments, to recipients in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	···					EVANGELISM &	
(1)	CANADA	1	27	PROGRAM	7.0	CHURCH PLANTING	836,833.
(2)	CANADA	1	2,	11:00:101		LANGUAGE	
						STUDY & CHURCH	
(3)	RUSSIA	1	5	PROGAMS	AND GRANTS	PLANTING	193,428.
(4)					· · · · · · · · · · · · · · · · · · ·		
(5)	***						
(6)							
(7)							
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(8)							
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<u>(10)</u>							
<u>(11)</u>				1			
(12)							
(13)							
(14)							
(15)							
			***				
<u>(16)</u>							
<u>(17)</u>	0.1.1.1		32		ing a significant of the signifi		1,030,261.
	Sub-total	2	32				2,000,201.
	Total from continuation sheets to Part I			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1 020 261
	Totals (add lines 3a and 3b)	2	32				1,030,261.

92-6004561

Page 2

INTERACT MINISTRIES, INC.

Schedule F (Form 990) 2010

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000... ▶□ Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		CANADA	CHURCH PLANTING	836,833.	ACH TRANSFER			The state of the s
(2)	世帯 (1977年) (	RUSSIA	CHURCH PLANTING	193, 428.	ACH TRANSFER			1000
(3)				TATALIS CONTRACTOR CON				
(4)								Total Control
9				***************************************		11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		and the second s
(9)		:						
6								
(8)								
(6)								
(10)								
(I)								
(12)								
(13)								
(14)					Annie met n			TERMINATED AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADD
(15)								
(16)				į				
2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	zations listed above t section 501(c)(3) eq	hat are recognized uivalency letter	as charities by t	he foreign country,	recognized as ta	x-exempt by the IR	S, or for which	0

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3 Enter total number of other organizations or entities.

Schedule F (Form 990) 2010

Page 3

92-6004561

Schedule F (Form 990) 2010

Part III

INTERACT MINISTRIES, INC.

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

Schedule F (Form 990) 2010 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance (18) BAA (12) (13) (14) (15) 9 6 2 9 € 9 8 9 (11) € 8 <u>ଚ</u>

Sche	dule F (Form 990) 2010 INTERACT MINISTRIES, INC. 92-	6004561	Page <b>4</b>
	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see instructions for Form 926)	. Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see instructions for Forms 3520 and 3520-A).	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471).	. Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621).	. Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865).	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713)	Yes	X No
BAA	TEEA3505L 10/27/10	Schedule F (F	orm 990) 2010

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047 2010

Open to Public Inspection Employer identification number 92-6004561 Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990.

Schedule 1 (Form 990) 2010 ž (h) Purpose of grant or assistance PLANTING PRINTING CHURCH BIBLE Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. XYes Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to 2 Enter total number of section 501(c)(3) and government organizations...... (g) Description of non-cash assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (f) Method of valuation (book, FMV, appraisal, other) TEEA3901L 10/29/10 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. SEE PART IV 0 0 (e) Amount of non-cash assistance 5,426. (d) Amount of cash grant 99,157 (c) IRC section if applicable BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 Part II can be duplicated if additional space is needed. Part I General Information on Grants and Assistance 92-0021800 20-8239246 (D) EIN 3 Enter total number of other organizations... (1) GOD'S WORD FOR NATIONS

BOX 1259 1 (a) Name and address of organization or government INTERACT MINISTRIES, 1 | 1 | 1 SEND NORTH BOX 369 BOX 369 GLENNALLON 1 | 1 | 1 | 1 | ROLLA, MO Name of the organization C ଞ୍ଚ €¦ ତ୍ୱ ତ୍ୱ ପ୍ର

Schedule I (Form 990) 2010 Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (f) Description of non-cash assistance 1, line 2, and any other additional information (e) Method of valuation (book, FMV, appraisal, other) WERE USED FOR THE INTENDED PURPOSES. FAILURE TO PROVIDE SUCH INFORMATION IN A TIMELY REPORT SHALL INCLUDE SUFFICIENT INFORMATION FOR INTERACT TO DETERMINE THAT THE FUNDS FUNDS WERE SPENT AND PROGRESS MADE IN ACCOMPLISHING THE PURPOSE OF THE GRANT. THIS INTERACT A WRITTEN REPORT. THE REPORT WILL INCLUDE THE MANNER IN WHICH THESE GRANT PARTIALLY COMPLETED PROJECTS, THE ORGANIZATION RECEIVING THE GRANT WILL SUBMIT TO UPON COMPLETION OF THE PROJECT, OR NO LATER THAN EACH JANUARY 31 FOR ONGOING OR Part IV | Supplemental Information. Complete this part to provide the information required in Part I (d) Amount of non-cash assistance PARTI, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S. (c) Amount of cash grant MANNER MAY JEOPARDIZE FUTURE GRANT REQUESTS. INTERACT MINISTRIES, INC. (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) 2010 m Ŋ 9

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# SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047 2010

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

INTERACT MINISTRIES, INC.	92-6004561
FORM 990, PART III. LINE 4D - OTHER PROGRAM SERVICES DESCRIF	PTION
OTHER PROGRAMS AND MINISTRIES - BIBLE TRAINING AND RELA	TED CONFERENCES SERVICES TO
SUPPORT CHURCH PLANTING AND EVANGELISM MINISTRIES.	
BIBLE SCHOOL AND TRAINING SERVING APPROXIMATELY 85 INDI	VIDUALS.
HOME MINISTRIES AND SERVICES TO MINISTERS - SERVING APP	ROXIMATELY 140 MISSIONARIES,
AND HOME CALLS TO APPROXIMATELY 600 INDIVIDUALS	
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
COPIES OF 990 ARE REVIEWED BY THE FINANCE & AUDIT COMMI	TTEE OF THE BOARD AT EACH
AUGUST MEETING AND A REPORT OF THE REVIEW GIVEN TO THE	COMPLETE BOARD AT ITS AUGUST
MEETING USUALLY LATER THE SAME DAY OR THE FOLLOWING DAY	· 
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND EN	IFORCEMENT OF CONFLICTS
ALL BOARD MEMBERS ARE ASKED TO REVEAL ANY POSSIBLE CONF	LICTS OF INTEREST AT EACH
BOARD MEETING.	
FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL	
COMPENSATION FOR ALL STAFF IS SET USING INFORMATION FOR	COMPARABLE POSITIONS AS
LISTED IN "THE COMPENSATION HANDBOOK FOR CHURCH STAFF"	PUBLISHED ANNUALLY BY RICHARD
HAMMAR AND ADJUSTED FOR SPECIFIC MINISTRIES AND LOCATION	NS.
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PU	BLICLY AVAILABLE
GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE	AVAILABLE FOR REVIEW AT OUR
LOCATION UPON REQUEST.	
FINANCIAL STATEMENTS ARE POSTED ON OUR WEBSITE, OTHER'S	WEBSITES AND PROVIDED UPON
REQUEST.	

2010

## SCHEDULE O - SUPPLEMENTAL INFORMATION

PAGE 2

CLIENT G507

INTERACT MINISTRIES, INC.

92-6004561

FORM 990, PART XI, LINE 5 OTHER CHANGES IN NET ASSETS OR FUND BALANCES