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SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information — (See separate Instructions.)

OMB No. 1545-0047

2007

Department of the Treasury Internal Revenue Service	• •	he above organizations and a		•	10 or 990-EZ.	
Name of the organization					Employer identification	number
EPISCOPAL LAYM	ANS MISSION SOCIETY				93-0559964	
Part I Comp	ensation of the Five Hig	hest Paid Employees	Oth	er Than Officer	s, Directors, ar	d Trustees
(See	instructions. List each or	ne. If there are none, e	nter	'None.')		
employ	nd address of each yee paid more an \$50,000	(b) Title and average hours per week devoted to position		(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
ALLAN HUNT PORTLAND, OR		EXEC. DIRECTOR	40	63,577.	6,925.	0.
SUSAN BETTIS PORTLAND, OR		COUNSELING DIR	40	51,952.	6,624.	0.
Total number of other e	<u></u>		0	Land to the second seco		
Part II — A Comp (See	pensation of the Five High instructions. List each or	ghest Paid Independer ne (whether individuals	or	o <mark>ntractors for F</mark> firms). If there a	Professional Se are none, enter	rvices 'None.')
(a) Name and adda	ress of each independent contr	actor paid more than \$50,000)	(b) Type	of service	(c) Compensation
NONE						
					······································	
						
Total number of others \$50,000 for professions	receiving over		0			
	pensation of the Five Hi	about Baid Indonendo		1939 1930 TO AN ADDISON OF STORES	Whor Sondans	
(List	each contractor who per . If there are none, enter	formed services other	han	professional se	ervices, whethe	r individuals or
(a) Name and add	ress of each independent conti	ractor paid more than \$50,00	0	(b) Type	of service	(c) Compensation
NONE						
					-	
Total number of other over \$50,000 for other			r			1

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

Schedule A (Form 990 or 990-EZ) 2007

Schedule A (Form 990 or 990-EZ) 2007 EPISCOPAL LAYM	IANS MISSION SOCIETY	93-0559964	1	Page 2
Raitilli Statements About Activities (See instruct	ions.)		Yes	No
1 During the year, has the organization attempted to influence n to influence public opinion on a legislative matter or referendu	m? If 'Yes.' enter the total expen	including any attempt ses paid		
or incurred in connection with the lobbying activities > \$	N/A		1	I
(Must equal amounts on line 38, Part VI-A, or line i of Part VI-	·B.)		1	<u> </u>
Organizations that made an election under section 501(h) by forganizations checking 'Yes' must complete Part VI-B AND at lobbying activities.	filing Form 5768 must complete Patach a statement giving a detailed	art VI-A. Other I description of the		
2 During the year, has the organization, either directly or indired substantial contributors, trustees, directors, officers, creators, taxable organization with which any such person is affiliated a beneficiary? (If the answer to any question is 'Yes,' attach a direction.)	ctly, engaged in any of the following the semployees, or members of the semployees, or members of the semployees, an officer, director, trustee, may be tailed statement explaining the semployees.	ng acts with any heir families, or with any jority owner, or principal transactions.)		
a Sale, exchange, or leasing of property?			2a	X
b Lending of money or other extension of credit?			2b	x
c Furnishing of goods, Services, or facilities?			2c	<u>x</u>
d Payment of compensation (or payment or reimbursement of e	expenses if more than \$1,000)?		24	x
e Transfer of any part of its income or assets?			2e	X
3a Did the organization make grants for scholarships, fellowships explanation of how the organization determines that recipients	s, student loans, etc? (If 'Yes,' att s qualify to receive payments.)	ach an	3а	<u>x</u>
b Did the organization have a section 403(b) annuity plan for its	employees?		3Ь	X_
c Did the organization receive or hold an easement for conserve to preserve open space, the environment, historic land areas 'Yes,' attach a detailed statement	ation purposes, including easeme or historic structures? If	ints	3c	x
d Did the organization provide credit counseling, debt managem	nent, credit repair, or debt negotia	ation services?	3d	<u> x</u>
4a Did the organization maintain any donor advised funds? If 'Ye 4f and 4g			4a	X_
b Did the organization make any taxable distributions under sec	tion 4966?		4b N	A A
Did the organization make a distribution to a donor, donor ad-	visor, or related person?		4c N	IVA
d Enter the total number of donor advised funds owned at the e	end of the tax year	······		N/A
e Enter the aggregate value of assets held in all donor advised	funds owned at the end of the ta	x year		N/A
f Enter the total number of separate funds or accounts owned a funds included on line 4d) where donors have the right to proamounts in such funds or accounts	at the end of the tax year (excluding vide advice on the distribution or	ing donor advised investment of		0
g Enter the aggregate value of assets held in all funds or accou	unts included on line 4f at the end	of the tax year >		0.
BAA	EA0402L 12/27/07	Schedule A (Form 990 or For	n 990-E	Z) 2007

Sche	dule A (Form 990 or 990-EZ) 2007 EP	ISCOPAL LAYMANS	MISSION SOCIETY		93-05599	164 Page 3
Şâï	Reason for Non-Private F	oundation Status (S	See instructions.)			
cert	ify that the organization is not a private fo	oundation because it is: (P	lease check only ONE appli	icable box.)		
5	A church, convention of churches, or	r association of churches.	Section 170(b)(1)(A)(i).			
6	A school. Section 170(b)(1)(A)(ii). (A	also complete Part V.)				
7	A hospital or a cooperative hospital	service organization. Secti	on 170(b)(1)(A)(iii).			
8	A federal, state, or local government	t or governmental unit. Se	clion 170(b)(1)(A)(v).			
9	A medical research organization ope	erated in conjunction with a	a hospital. Section 170(b)(1))(A)(m). Ent	er the hospital	's name, city,
10	An organization operated for the ber (Also complete the Support Schedul	nefit of a college or universite in Part IV-A.)	sity owned or operated by a	governmer	ntal unit. Sectio	n 170(b)(1)(A)(iv).
11 a	An organization that normally receive Section 170(b)(1)(A)(vi). (Also comp	es a substantial part of its lete th e Support Schedul e	support from a government in Part IV-A.)	tal unit or fr	om the general	l public.
11 b	A community trust. Section 170(b)(1))(A)(vi). (Also complete th	e Support Schedule in Part	IV-A.)		
12	An organization that normally receive from activities related to its charitable from gross investment income and unorganization after June 30, 1975. Se	e, etc, functions — subjecturelated business taxable e section 509(a)(2). (Also	t to certain exceptions, and income (less section 511 to complete the Support Sche	(2) no mo nax) from bus adule in Pari	e than 33-1/3% sinesses acquir t IV-A.)	of its support ed by the
	An organization that is not controlled requirements of section 509(a)(3). C	heck the box that describe	es the type of supporting or	ganization:	na otnerwise ii •	neets the
	Type I Type II Provide the		nally integrated organiza	Type III		
	(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	Is the su organization the sup organic gove	d) ipported on listed in oporting zation's rming nents?	(e) Amount of support
				Yes	No	
					Ţ	
	•					
otal	I				<u> </u>	0.
	_	ahad ka kasa ta a ta a t	A. Carlles Poorting of	********		
14 3AA	An organization organized and oper	ated to test for public safe	ry. Section 509(a)(4). (See			990 or 990-EZ) 2007

	dule A (Form 990 or 990-EZ) 2007		<u>AYMANS MISSIO</u>		<u>9</u> 3-05599	
Par	NV-A Support Schedule (Complète only if you c	hecked a box on line	10, 11, or 12.) Use c	ash method of accou	nting.
Note	You may use the worksheet in the	e instructions for conv	erting from the accru	al to the cash method	f of accounting.	-
Cale	ndar year (or fiscal year nning in)	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15	Giffs, grants, and contributions received. (Do not include unusual grants. See line 28.)	1,909,807.	1,868,154.	852,302.	1,549,743.	6,180,006.
16	Membership fees received					0.
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose	662,700.	647,700.	609,700.	576,800.	2,496,900.
18	Gross income from interest, dividends, amts rec'd from payments on securities loans (sec. 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less sec. 511 taxes) from businesses acquired by the organization after June 30, 1975.	78,213.	67,174.	59,754.	24,567.	229,708.
		70,223.	07,174	33,734.	21,307.	225, 100.
	Net income from unrelated business activities not included in line 18					0.
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.					0.
21						0.
22	Other income. Attach a					<u>-</u>
	schedule. Do not include gain or (loss) from sale of capital assets. SEE . STMT . 8 .	56,586.	25,396.	108,136.		289,829.
_23		2,707,306.	2,608, <u>4</u> 24.	1,629,892.		9,196,443.
24	Line 23 minus line 17	2,044,606.	1,960,724.	1,020,192.	1,674,021.	6,699,543.
25	Enter 1% of line 23	27,073.	26,084.	16,299.	22,508.	
26	Organizations described on lines	10 or 11: a Ente	er 2% of amount in co	olumn (e), line 24	N/A ► 26a	
	Prepare a list for your records to show the supported organization) whose total gifts f- return. Enter the total of all these excess a	mounts				
•	: Total support for section 509(a)(1) test: Enter line 24, c	olumn (e)		► <u>26c</u>	
•	i Add: Amounts from column (e) fo	r lines: 18		19 26b		
		22		26b	<u>26</u> d	
	Public support (line 26c minus lin				26e	
27	Public support percentage (line 2 Organizations described on line	<u>Se (numerator) divide</u> 12:	d by line 26c (denom	inator))	<u> ≥ 261</u>	<u> </u>
	a For amounts included in lines 15, name of, and total amounts recei such amounts for each year:	ved in each year from	i, each 'disqualified p	erson.' Do not file this	s list with your return	. Enter the sum of
	(2006)0.	(2005)	0. (2004)_	0	_ (2003)	0.
	bFor any amount included in line 1 to show the name of, and amoun \$5,000. (Include in the list organiz After computing the difference be differences (the excess amounts)	zations described in lif tween the amount rec	nes 5 through 11b, as seived and the larger	s well as individuals.) amount described in	Do not file this list wi (1) or (2), enter the su	ith your return. um of these
	(2006)0.	(2005)	0 (2004) _	0	_ (2003)	0.
•	(2006) 0. Add: Amounts from column (e) for 2, 1 Add: Line 27a total Public support (line 27c total minumature) Total support for section 509(a)(2)	r lines: 15	6,180,006.	16		1
	17	496,900. 20 _		21		8,676,906.
•	Add: Line 2/a total	<u>U.</u> an	nd line 27b total		<u>U.</u> 27d	0.
	Public support (line 27c total min	us line 27d total)				<u>8,676,906.</u>
1	total support for section 509(a)(2) test: Enter amount f	rom line 23, column ((e) * [27f]	9, 196, 443.	
•	g Public support percentage (line 2	?/e (humerator) divide	id by line 27f (denomi	nator))	<u>- 27g</u>	94.35 %
	Investment income percentage (I					
<i>e</i> s	Unusual Grants: For an organiza list for your records to show, for on nature of the grant. Do not file th	each vear, the name o	of the contributor, the	date and amount of	ints during 2003 throu the grant, and a brief	ign 2005, prepare a description of the

हु द्वा	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/A		_
			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
	a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	***************************************	powerces
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
•	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with Student admissions, programs, and scholarships?	320		
,	d Copies of all material used by the organization or on its behalf to solicit contributions?	30		
33	Does the organization discriminate by race in any way with respect to:			
i	a Students' rights or privileges?	33a	-	-
	b Admissions policies?	33t		
	c Employment of faculty or administrative staff?		<u> </u>	-
	d Scholarships or other financial assistance?			
	e Educational policies?	33 (
	f Use of facilities?	331		-
	g Athletic programs?	33	9	_
	h Other extracurricular activities?	331	1 5 / 288	# # # # # # # # # # # # # # # # # # #
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)			
		-		
34	a Does the organization receive any financial aid or assistance from a governmental agency?	34	a	_
	b Has the organization's right to such aid ever been revoked or suspended?	34	Ь	
	If you answered 'Yes' to either 34a or b, please explain using an attached statement.			
35	sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation	35		Pariti
BA		90 or	990-EZ	2007

Sche	dule A (Form 990 or 990	-EZ) 2007 EPISCO	PAL LAYMANS MI	SSION SOCIE	ETY_		93-0	559	964 P	age 6	
	Lobbying Ex (To be complete								N/A		
Chec	k > a if the organiz	zation belongs to an affi	liated group. Check	<u>► b if you</u>	check			contr	ol' provisions app	у	
		imits on Lobbying	•			(a Affiliate tota	d grou	p	(b) To be complet for all electin	ed a	
		'expenditures' means a							organization		
36	Total lobbying expenditu	-		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	36						
37	Total lobbying expenditu			•••	37						
38	Total lobbying expenditu				38_				·····		
39	Other exempt purpose e	•			39	·					
40	Total exempt purpose e	-	•		40	*****************	2000000000			Simina ad	
41	Lobbying nontaxable an		-								
	If the amount on line 40		lobbying nontaxable ar					**			
	Not over \$500,000										
	Over \$500,000 but not over \$1,	-	•		1000		200000				
	Over \$1,000,000 but not over \$				41	***************	8.7 Sa. Janes		900000000000000000000000000000000000000	20000000	
	Over \$1,500,000 but not over \$		•								
42	Over \$17,000,000 Grassroots nontaxable a		•			THAN YANG					
43			•		42						
44	Subtract line 42 from line Subtract line 41 from line				43						
	Caution: If there is an a				44		22/32	C.F.C.F.		373888	
	Caudon: Il Giere is an a				1		en en en	*****		87.C9C03	
	(Some organ	nizations that made a se	Averaging Period ection 501(h) election de ee the instructions for lie	o not have to cor	mplete	I (h) all of the fiv	e colu	mns	below.		
			Lobbying Expen	ditures During 4	-Year	Averaging P	eriod				
	Calendar year (or fiscal year beginning in) ►	or fiscal year 2007 2006 2005					1) 104		(e) Total		
45	Lobbying nontaxable amount										
46	Lobbying ceiling amount (150% of line 45(e))										
47	Total lobbying expenditures										
48	Grassroots non- taxable amount	Ea 21, 1000 000000 000000 0 000000 0	5 000 J. COMPANIE DO MARIE DE 1100 DE 1								
49	Grassroots ceiling amount (150% of line 48(e))										
	Grassroots lobbying expenditures					<u> </u>					
		only by organizations that	at did not complete Par	t VI-A) (See insti		<u> </u>			N/A		
atter	ng the year, did the organ mpt to influence public op	pinion on a legislative ma	atter or referendum, thi	rough the use of:			Yes	No	Amount		
	Volunteers										
	Paid staff or manageme										
	: Media advertisements . I Mailings to members, le						\vdash		 		
	Publications, or published	•					$\vdash\vdash$		 		
	Grants to other organization										
	Direct contact with legis										
	n Rallies, demonstrations						\vdash				
	Total lobbying expendite						X 3	**			
•	If 'Yes' to any of the ab							200 X C 18	1		
BAA			giving a detailed (and the same of the				A (Fo	rm 990 or 990-EZ	2007	

	(Form 990 or 990-EZ) 20					ISSION				-0559		Pa	age 7
<u>Rart;VII</u>	Information Regard Exempt Organizati	ding Trans ons (See	fers To instruct	and ions)	Transa	ctions a	and	Relationships	With N	onchar	itable		
51 Did the	e reporting organization of Code (other than section	directly or inc n 501(c)(3) or	lirectly er ganizatio	ngage in ins) or is	n any of t	he followi 527, rela	ing w	with any other orga to political organiz	inization di ations?	escribed	in section	501(c)
a Transf	ers from the reporting or	rganization to	a nonch	aritable	exempt	organizati	lion (of:		_		Yes	No
	ısh										51a (i)		X
(ii) Ot	her assets										a (ii)		X
	transactions:									l			
	iles or exchanges of ass										b()		<u>_x</u> _
	irchases of assets from										b(i)		X
	ental of facilities, equipm										<u> </u>		<u> X</u>
	imbursement arrangem										b (iv)		X
	ans or loan guarantees										p (A)		X
	erformance of services o			_						t t	p (vi)		X
	ng of facilities, equipmen										c	لبيا	X
the go any tra	answer to any of the abo ods, other assets, or se ansaction or shanng arra	ove is Yes, o rvices given l angement, sh	by the repower in col	orting (d)	owing sci organizal) the valu	nedule. Ca lion. If the ue of the c	olum e org good	nn (b) should alway janization received is, other assets, or	ys show the less than r services i	e tair ma fair mark received:	rket value et value i	ot in	
(a) Line no.	(b) Amount involved	Name of		(c)				Description of trans	(6	f)			s
N/A	·	1					_						
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		<u> </u>								_			
descri	organization directly or bed in section 501(c) of s,' complete the following	the Code (ot	hated with her than	h, or rel section	ated to, 501(c)(3)	one or mo)) or in se	ore t	ax-exempt organiz n 527?	ations		► Ye	s X	No
	(a) Name of organization		ī	Type of	(b) organiza	tion		De	escription o	c) of relation	ship		
N/A							\neg						
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RAA			_						Schedule	A Œom	n 990 or 9	MAN F 7	7 200