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_237361925 10/15/2010 5 11 PM

Form -990

Department of the Treasury

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)

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

OMB No 1545-0047 2008
Open to Public Inspection

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<u>A</u>	For the 2008	B calendar y	ear, or tax y	ear beginnin	19		, and endir	ıg					
В	Check if applicab		1									D Empl	loyer identification number
	Address change	use IRS label or	1		St. Luk	<u>e's Ep</u>	piscor	al Ch	urc	h Fo	<u>dn .</u>	j	
	Name change	print or	Doing Bus	siness As								23-	-7361925
జ	realite Glarige	type.	Number a	and street (or P C) box if mail is not de	livered to street	address)			TR	toom/suite	E Telep	phone number
\sqcup	Initial return	See		•	Council		-						4-636-5460
П	Termination	Specific	;		country, and ZIP							G Gross rec	0 605 010
\exists		Instruc-		isbury	-	•	NC 2	8144				G Gross rec	2,03.,010
닏	Amended return						NC 2	0144				4	_
	Application pend	_{ding} F Nam	e and addres	ss of principal	officer								s a group return for
												affilia H(b) Are a	all affiliator III
												includ	ded? Yes No
		\										If "No	o," attach a list (see instructions)
\equiv	Tax-exempt	status X	501(c) ((_3) ◀	(insert no)	4947(a)(1) or	527		_			
7	Website: ▶	/-										H(c) Grou	ip exemption number
αk	Type of organiz		rporation	Trust	Association	Other	_			L Yea	r of formation		M State of legal domicale
<u> </u>	Part I	Summa		1.00.									, iii oddoo i ogai ooiiiida
				ation's missi	on or most sign	uficant activ	rtioe			_			
9	I DITE	-	_		_		iues						
_ e	:\ St	apporti	ng orga	mizatio	on (churc	n)							
岩													
U SCANNED NOV Activities & Governance	2 Chec	k this box	▶ ∐ if th	he organizat	tion discontinue	d its operat	ions or disp	osed of m	ore tha	n 25%	of its assets		
ďΩ	3 Num	ber of voting	g members	of the gove	ming body (Par	t VI, line 1a)					3	1
	4 Numi	_	_	_	s of the governi			1h)				4	
iii.	5 Total	•		(Part V, line	-	9 500) (2.1. 7.1,0	,				5	
<u>.</u>	6 Total								_				
⊋ ≼	o rotal			(estimate if i			- O (5.1)	/ED	7			6_	
n N N	7a lotal	l gross unrel	lated busine	ess revenue	from Part VIII,	line 12 Co qu	TO TO V	EU	ا ن			7a	
<u>. </u>	b Net u	unrelated bu	isiness taxa	ible income	from Form 990				<u>~</u>			7b_	0
_					41.5	lal or	T 19	2010 l '	9	⊢	Pnor Y		Current Year
	8 Cont		_	art VIII, line		18 00	, 1 1 0	·· \	(i)	_ ├		250	134,892
Revenue	9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and									ļ			
	10 Inves	stment incor	me (Part VII	II, column (A	۹), lines 3, 4, ar	id 7d)	CDEN	I I IT	1	L	43	31,000	-386,877
3 E	11 Othe	r revenue (F	Part VIII, co	lumn (A), lin	nes 5, 6d, 8c, 9d	c, <u>10c, and</u>	がカデ	<u> </u>					
à	12 Total	revenue—a	add lines 8	through 11 ((must equal Par	rt VIII, colur	nn (A), line	12)			43	31,250	-251,985
¥-	13 Gran	its and similar	ar amounts	paid (Part I	IX, column (A),	lines 1-3)					18	33,688	
₹	1			-	C, column (A), lu	-							
GSTMARK DATE OU! es Revenue	15 Calar				e benefits (Part		(A) lines F	≒1 0\		-		2,017	,
CA Uses	16a Profe	•			column (A), line		(7 (), 117103 0			\vdash			
_ =	to Table		_		• • •	•				<u> </u>			
Expe	b lotal	_			lumn (D), line 2					-	 _	77 710	410 034
] '' 0""	-	-		nes 11a-11d, 11	•				-		27,718	
	18 Total	expenses	Add lines 1	3-17 (must	equal Part IX, c	olumn (A),	line 25)			L		L3,423	+
	19 Reve	enue less ex	cpenses Su	ubtract line 1	18 from line 12							<u> 17,827</u>	
ĕ	8										Beginning		End of Year
sets	툂 20 Total	l assets (Pa	rt X, line 16	;)						L	4,74	12,416	4,078,398
t As	21 Total	l liabilities (F	art X, line 2	26)									
Net Assets or	튄 22 Neta	assets or fur	nd balances	s Subtract li	ine 21 from line	20					4,74	12,416	4,078,398
	Part II	Signatu	ire Block			,							
					et I bava averner	d this ration	includios os			المحمد عما			t of my knowledge
		and belief, if	t is true, com	ect, and comp	olete Deglaration	of preparer (c	ther than off	icer) is base	d on all	ies and informat	statements, an	eparer has a	any knowledge
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	gn	—		THE	· Jarga								
He	ere	•	ure of officer	_ /	,							Date	1. / /
		St	urges	Bryan	1		Secreta	Tream	Pre	sid	ent		10/5/2010
		Туре о	or print name	and title				<u> </u>					
		Preparer's	1 0	2 1		_			Date	:	Chec	k ıf	Preparer's identifying number
Pa	aid	signature	PK	-160	m:	(~/			1	/15	امء أ	Г	(see instructions) P00124620
Pı	reparer's						CD3 -	D3	1 10	<u>/ 13/</u>	/10 emplo		
	se Only	Firm's name			oy & Hil		CPAs	PA				EIN	▶ 56-1874892
•		if self-emplo		7	Statesv							Phone	
_		address, an			sbury,_		8144					no	→ 704-638-0431
Ma	y the IRS dis	scuss this re	eturn with th	ne preparer	shown above?	(see instruc	tions)						X Yes No
DA	A For Priva	acy Act and	l Paperwor	rk Reductio	on Act Notice,	see the sep	arate inst	ructions.				$\overline{\mathcal{I}}$	7 /) Form 990 (2008)
											, ,	Y	LLNE
												1	- 10-

Part III Sta	atement of Pr		opal Church	nents (see instructi	ons)	
1 Briefly describ	ne the organization	n's mission		Jose mendel		
pappor cr	ing Organ.	IZACION	(Church)			
		any significant	program services dunn	g the year which were no	t listed on	☐ Yes 🗓
	n 990 or 990-EZ? Inbe these new se	rvices on Sched	dule O			ies ka i
				n how it conducts, any pro	ogram	Yes XI
	ribe these change					
Section 501(c	c)(3) and 501(c)(4)	organizations	and section 4947(a)(1)	ion's three largest progra trusts are required to rep n program service reporte	oort the amount of grants and	
4a (Code Provided) (Expenses l support		sponsored a	ng grants of \$ activities) (Revenue \$	
4b (Code) (Expenses	\$	ınclud	ing grants of \$) (Revenue \$	
4c (Code) (Expenses	\$	ınclud	ing grants of \$) (Revenue \$	
4d Other program	m services (Desc		e O)) (Revenue \$)
4e Total progra	ım service expen	ses 🕨 \$		(Must equal Part IX, L	ine 25, column (B))	Form 990 (2

Part IV Checklist of Required Schedules

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			77
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	١.		v
_	Schedule C, Part II	4_		<u> </u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	_		
_	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	_	
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete	6		x
7	Schedule D, Part I 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,"	├ `		
٠	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	<u> </u>		
•	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 hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VIII, VIII, IX, or X as applicable	11		X
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	ļ		ļ
	business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	ļ		
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	<u> </u>	X
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, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	 -	X
18 40	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	 	X
19 20	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	 	X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	 	x
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete	-		T
	Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b-24d and complete Schedule K If "No," go to question 25	24a	<u>L</u> .	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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	<u> </u>	<u> </u>
ď	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	<u> </u>
25a	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	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified	1_	1	
	person from a pnor year? 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		1	
- →	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	├	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	27	1	x
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	990	(2000)

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		-	ĺ
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or	ļ		
	employee), or an indirect business relationship through ownership of more than 35% in another entity			1
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? 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		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, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
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	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	<u>VI</u>	37		х

Form **990** (2008)

	otatements regarding other mornings and rax compliance		$\overline{}$		
4	Established who are to be Do. O. (Form 1000 Accord Output and To. 1994 of	Г	-	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U.S. Information Returns. Enter -0- if not applicable	1a			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	able able	ļ	ļ	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and report	able		ł	x
•-	gaming (gambling) winnings to prize winners?		1c		
2a			ļ	Į	
	Statements, filed for the calendar year ending with or within the year covered by this return		<u>, </u>	ľ	
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 this return (see instructions)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered b	y	ľ		
	this return?		3a		<u> </u>
þ	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	1	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authors.	nonty			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	cial			
	account)?		4a		X
b	If "Yes," enter the name of the foreign country			i	
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bar	nk			
	and Financial Accounts]		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	12	5b		X
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	Ì	- 1	Ì	
	Regarding Prohibited Tax Shelter Transaction?		5c		
6a	Did the organization solicit any contributions that were not tax deductible?		6a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions	or	Ì		
	gifts were not tax deductible?	,	6b		
7	Organizations that may receive deductible contributions under section 170(c).		1		
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more that	ın	1		
	\$75?	•	7a		X
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	•	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		_		7,
_	required to file Form 8282?	l 1	7c	-	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		- 1	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a pers	onal	_		77
	benefit contract?		7e		X
†	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	´ .	7f	_	_
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	•	7.		x
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sect	ion	7h		
0	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsor		ļ		
	organization, have excess business holdings at any time during the year?	anng	8		x
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		*		
а	Did the organization make any taxable distributions under section 4966?		9a		x
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		X
10	Section 501(c)(7) organizations. Enter		<u> </u>		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1		
11	Section 501(c)(12) organizations. Enter		- 1		
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them)	11b			1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10		12a		l
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			

Page 6 Governance, Management, and Disclosure (Sections A, B, and C request information about policies not Part Vi required by the Internal Revenue Code.) Section A. Governing Body and Management No Yes For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions Enter the number of voting members of the governing body Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 X 3 supervision of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a material diversion of the organization's assets? 5 6 Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a X 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b X Does the organization have local chapters, branches, or affiliates? 9a 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? 9b Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations 10 X must describe in Schedule O the process, if any, the organization uses to review the Form 990 10 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies Yes No 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 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 12c Does the organization have a written whistleblower policy? 13 13 14 Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official? 15a Other officers or key employees of the organization? 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 taxable entity during the year? X 16a 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? 16b Section C. Disclosure 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 Form 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 Own website Another's website Upon request 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial 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 ▶ Sturgis Bryan 131 W Council Street 704-633-3221 Salisbury NC 28144

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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

(A)	(B) Average	Posi	tion (C) all ti	nat ap	(vla	(D) Reportable	(E) Reportable	(F) Estimated	
Name and Title	hours per week	Individual trustee or director		Officer	Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
St. Lukes resident								0	0		
St. Lukes											
ice Pres.								0	0		
St. Lukes									,		
reasurer		Д	<u>L</u>					0	0		
St. Lukes			1	1							
rustee		+	 	_		\vdash		0	0		
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Pa	rt VII Section A	A. Officers, Di	irectors, Trus	tees	, Ke	y En	ploy	/ees	, and	Highest Compensated Er	nployees (continued)			
	(A) Name and title	Ave	B) erage rs per eek	or director			_	Highest compensated		(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	amou oti compe	nated int of	
_				rustee	l trustee		yee	mpensated		(W-2/1099-MISC)			zation elated zations	
					<u> </u>			_					_	
_														
				-		-								
				<u> </u>										
				-				_	<u> </u>					
							<u> </u>		-					
	Total	<u> </u>												
2		ividuals (includ	ding those in	1a) w	ho re	eceiv	ed n	nore	than	\$100,000 in reportable com	pensation from the			
3	employee on line 1a	a? If "Yes," cor	mplete Sched	ule J	for s	uch	ındıv	ıdual	l	ee, or highest compensated		3	Yes	No.
4	the organization and individual	d related orgai	nizations grea	ter th	an \$	150,	0003	۱f "۱	Yes,"	and other compensation fror complete Schedule J for su		4		X
5 Sec	Did any person liste services rendered to ction B. Independen	o the organiza	tion? If "Yes,"							unrelated organization for ich person		5	<u></u>	Х
1		for your five h	ighest compe	nsate	ed in	depe	ende	nt co	ntrac	ctors that received more that	n \$100,000 of			
_		Name and bus	A) siness address							Descrip	(B) tion of services		(C) Compens	sation
									+		- , , , , , , , , , , , , , , , , , , , 	-		
				ding	thos	e ın	1) wł	no re	ceive	ed more than \$100,000 in				
DAA	compensation from	the organizati	ion 🕨										0 m 99	0 (000

Pa	rt V	III Statement of Rev	venue						
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
રા જ	1a	Federated campaigns	1a				Tevende		312, 313, 0, 314
Program Service Revenue Contributions, gifts, grants		Membership dues	1b						
PE		Fundraising events	1c						
ara		Related organizations	1d						
S, g		Government grants (contributions)	1e					ļ	
<u>6</u> .5		All other contributions, gifts, grants,	"					Ì	
E E	•	and similar amounts not included above	1 _f	1	34,892				
d ii	~	Noncash contributions included in lines							
Se	_	Total. Add lines 1a–1f	10-11			134,892			
-		Total: Add lines to th			Busn. Code				
eug	2a				Dusii. Code				
Š	b								
8	C					-			
eZ.	d								
E	e								
gra	-	All other program service rev	/enue						
P	g				•				<u></u>
_	3	Investment income (including	a divider	ds. interes					
		other similar amounts)	•		, ▶	152,385	101,293		51,092
	4	Income from investment of ta	ax-exem	pt bond pro	ceeds 🕨				
	5	Royalties			•				
		(ı) Rea	al	(II) P	ersonal				
	6a	Gross Rents				ł			
	b	Less rental exps				ì			
	С	Rental inc or (loss)							
	_d	Net rental income or (loss)			<u> </u>				
	7a	Gross amount from (i) Secur sales of assets	ities	(11)) Other				
		other than inventory 2,410,533							
	b	Less cost or other							
			9,795			į			
	С	Gain or (loss)	9,262	<u>: </u>					
	d	Net gain or (loss)			<u> </u>	-539,262	-539,262		
	8a	Gross income from fundraising e	vents	1					
θn		(not including \$		1					
ven		of contributions reported on line	1c)						
8		See Part IV, line 18	a	\					
Other Revenue		Less direct expenses	t						
ō		Net income or (loss) from ful		events			··	 	
	9a	Gross income from gaming activ	ities						
		See Part IV, line 19	ā	$\overline{}$					
		Less direct expenses	t						
		Net income or (loss) from ga	_	tivities					·
	10a	Gross sales of inventory, les	ss						
	_	returns and allowances	8						
		Less cost of goods sold							
	c	Net income or (loss) from sa		ventory	Duan Oct			<u> </u>	
	44	Miscellaneous Reve	nue		Busn. Code		-		
	11a				 				
	b							 	
	ر 2	All athor			<u> </u>				
	d	All other revenue						·	
	12	Total. Add lines 11a-11d	h 2c 2	4 E 64 7:	•	-			
	12	Total Revenue. Add lines 1	ıı, ∠g, 3,	4, 5, 60, 70		-251,985	-437,969	o	E1 000
		9c, 10c, and 11e			>	251,985	-437,909	U	51,092

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).

Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
<u>7b,</u>	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21		· 		
2	Grants and other assistance to individuals in	 		<u> </u>	
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,			1	
	organizations, and individuals outside the		•	1	
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members		 	<u> </u>	
5	Compensation of current officers, directors,			}	
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		•		
	persons described in section 4958(c)(3)(B)	_			
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b					
С	Accounting				
d					
е	D () () () () () () ()				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses		-		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а	Disbursement	252,656		252,656	
b	Misc cash disbursements	133,215		133,215	
С	Admin expenses	23,198		23,198	
d	Other expense	2,965		2,965	
θ	-				
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	412,034		412,034	
26	Joint Costs. Check here Inf following				
	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				

<u>P</u>	art X	Balance Sheet					
				(A) Beginning of year		(B) End of yea	г
	1	Cash—non-interest bearing			1		
	2	Savings and temporary cash investments			2		
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net			4		
	5	Receivables from current and former officers, directors, tru	stees, kev				
		employees, or other related parties Complete Part II of Sci	•		5		
	6	Receivables from other disqualified persons (as defined un					
		4958(f)(1)) and persons described in section 4958(c)(3)(B)		į į	- 1		
		Part II of Schedule L	Complete		6		
10	7	Notes and loans receivable, net			7		
Assets	8	Inventories for sale or use			8		
SS	_				9		
A	9	Prepaid expenses and deferred charges	امما		-		
	10a	Land, buildings, and equipment cost basis	10a	 			
	D	Less accumulated depreciation Complete	401	}			
		Part VI of Schedule D	10b	4,742,416	10c	4,078	200
	11	Investments—publicly traded securities		4,742,416	11	4,078	, 390
	12	Investments—other securities See Part IV, line 11	 	12	_		
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11		1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	15	4 050	200
	16	Total assets. Add lines 1 through 15 (must equal line 34)		4,742,416	16	4,078	,398
	17	Accounts payable and accrued expenses Grants payable			17		
	18		_				
	19	Deferred revenue		19			
/ 0	20	Tax-exempt bond liabilities			20		
ë	21	Escrow account liability Complete Part IV of Schedule D			21		
Liabilities	22	Payables to current and former officers, directors, trustees	, key	- \	-		
jab		employees, highest compensated employees, and disquali					
		persons Complete Part II of Schedule L			22		
	23	Secured mortgages and notes payable to unrelated third p	arties		23		
	24	Unsecured notes and loans payable			24		
	25	Other liabilities Complete Part X of Schedule D			25		
_	26	Total liabilities. Add lines 17 through 25			26		
ces		Organizations that follow SFAS 117, check here ▶	and	1	ł		
ğ		complete lines 27 through 29, and lines 33 and 34.					
<u>ā</u>	27	Unrestricted net assets			27		
ä	28	Temporarily restricted net assets			28		
or Fund Balan	29	Permanently restricted net assets			29		
Ξ		Organizations that do not follow SFAS 117, check here	e ▶ X				
		and complete lines 30 through 34.	-				
	30	Capital stock or trust principal, or current funds		4,754,764	30	4,064	,913
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fu	und		31		
Ş	32	Retained earnings, endowment, accumulated income, or o	ther funds	-12,348	32	13	, 485
×	33	Total net assets or fund balances		4,742,416	33	4,078	,398
ž	34	Total liabilities and net assets/fund balances		4,742,416		4,078	
P	art)						
						Ye	s No
1	Ac	counting method used to prepare the Form 990	ash Accrual	Other			
28		ere the organization's financial statements compiled or revie				2a	X
t		ere the organization's financial statements audited by an indi	•			2b	X
		Yes" to lines 2a or 2b, does the organization have a commit	•	ty for oversight of		 	
		e audit, review, or compilation of its financial statements and	· · · · · · · · · · · · · · · · · · ·	-		2c	
3:		a result of a federal award, was the organization required to					$\neg \vdash \neg$
-		e Single Audit Act and OMB Circular A-133?				3a	1
ŀ		Yes," did the organization undergo the required audit or aud	its?			3b	
	. "	700, the the organization undergo the required adult of adu					

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

St. Luke's Episcopal Church Fdn.

Employer identification number 23-7361925

Pa	art l	Reas	<u>on for Public Cl</u>	nari <u>ty S</u>	itatus (All o	rganizations	must co	mplete	this pa	art <u>.) (s</u>	<u>ee ins</u>	<u>structic</u>	ons)		
The o	orgai	nization is not a	a private foundation t	ecause i	t is (Please che	eck only one org	anization)				_			
1	П	A church, con	vention of churches,	or assoc	ation of church	es described in	section 1	70(b)(1)(A	۸)(i).						
2	П	A school desc	cobed in section 170	(b)(1)(A)	(ii). (Attach Sch	nedule E)									
3	П		a cooperative hospita				on 170(b)	(1)(A)(iii).	(Attach	Schedu	le H)				
4	П	•	earch organization o		•				•		,	e hospit	tal's name.		
		city, and state	-		,				(- /(- /	. , ,			,		
5	П	· •	on operated for the b	enefit of a	a college or uni	versity owned or	operated	hy a gove	mmenta	l unit de	scabed	ın			
	ш	-	b)(1)(A)(iv). (Comple		-		оролакоа	J, u goto			0011000				
6	\Box	•	te, or local governme		•	described in sec	tion 170/	h)/1)/A)/v	١						
7	Н		•	_			•		•	the ge	neral nu	hlic			
	ш	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)													
8	П	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)													
9	Н														
	ш	An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its													
		•	gross investment inc	•		=	•					i ito			
		• •	ne organization after				•		i i tuzy iii	Jiii Dasi	100000				
10	\Box		=						a)/A) /se	o inetrii	ctions)				
11	X	An organization organized and operated exclusively to test for public safety. See section 509(a)(4), (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the													
•												tion			
	purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h														
		a X Type I b Type II c Type III-Functionally Integrated d Type III-Other													
е	X														
•	==	persons other than foundation managers and other than one or more publicly supported organizations described in section													
		509(a)(1) or section 509(a)(2)													
f			ation received a writte	en detern	nination from th	e IRS that it is a	Type I. Ty	ne II. or T	vpe III si	ntogaar	α				
·		-	check this box				.,,,,,	po , o	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		3				П
g		•	17, 2006, has the or	anızatıo	n accepted any	aift or contributi	on from a	nv of the							ш
9		following per		J		J		.,							
			who directly or indir	ectly cont	trols, either alor	ne or together w	th persons	s describe	d in (ii)					Yes	No
		•	pelow, the governing	•		-			()				11g(X
		• •	member of a person	•		g							11g(X
		•	ontrolled entity of a p			(ii) above?							11g		X
h			ollowing information			* *	supports						<u></u>		
	Nom	e of supported							(c) Det		(40)	la tha	(mi) A	mount of	
(1)		ganization	(ii) EIN			organization on lines 1-9		organization sted in your	(v) Did y the organ	-	organizat	is the		ipport	
				ļ	above or	RC section	governing	document?	∞l (ı)		(i) organi	zed in the			
			}		(see inst	ructions))				ort?		S?			
		T 1 1 -	7-1	<u> </u>	_1		Yes	No	Yes	No	Yes	No			
٦١	τ.	ruke s	Episcopal	Chur	cn		1			7.7					
			 				 	X		<u> </u>	├	X			
			Į												
					<u> </u>		+	 			 				
			 				+	 	 		 				
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Tota	<u> </u>							ļ				,	ļ		

<u>Sche</u>	dule A (Form 990 or 990-EZ) 2008 St.					<u>-7361925</u>	Page 2
Pa	rt II Support Schedule for Or				(1)(A)(iv) and '	170(b)(1)(A)(vi)	
<u></u>	(Complete only if you che tion A. Public Support	ecked the box of	on line 5, 7, or	B of Part I.)			
		(-) 2004	(h) 2005	(-) 2000	(4) 0007	(-) 0000	(D. Tatal
Cai	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1-3						
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						
<u>S</u> ec	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on		,				
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10	L	<u> </u>		ļ	L	
12	Gross receipts from related activities, etc. (•				12	
13	First five years. If the Form 990 is for the	=	second, third, fourti	n, or fifth tax year a	is a section 501(c)	(3)	
	organization, check this box and stop here						<u> </u>
	tion C. Computation of Public Su						
14	Public support percentage for 2008 (line 6,			f))		14	%
15	Public support percentage from 2007 Sche					15	%
16a	33 1/3 % support test-2008. If the organ			3, and line 14 is 33	1/3 % or more, cho	eck this box	
	and stop here. The organization qualifies a		•				▶ ∐
b	33 1/3 % support test—2007. If the organ				is 33 1/3 % or mor	e, check this	
	box and stop here. The organization qualif		•				▶ ∟
17a	10%-facts-and-circumstances test—200						
	more, and if the organization meets the "fa				•	V how the	
	organization meets the "facts-and-circumst		-		•		▶ [
b	10%-facts-and-circumstances test—200						
	more, and if the organization meets the "fa					V how the	_
	organization meets the "facts-and-circumst	ances" test. The or	ganization qualifies	as a publicly supp	orted organization		▶ _
18	Private foundation. If the organization did	not check a box or	line 13, 16a, 16b	17a, or 17b, check	this box and see ii	nstructions	▶ □

Schedule A (Form 990 or 990-EZ) 2008

Page 3

Schedule A (Form 990 or 990-EZ) 2008 St. Luke's Episcopal Church Fdn. 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.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1-5 Amounts included on lines 1, 2, and 3 7a received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 (b) 2005 (c) 2006(d) 2007 (e) 2008 (f) Total Amounts from line 6 Gross income from interest, dividends, payments received 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 Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, 13 and 12) 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) 14 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 33 1/3 % support tests—2008. 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 33 1/3 % support tests—2007. 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

Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008 St. Luke's Episcopal Church Fdn.

23-7361925

Page 4

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

237361925 St. Luke's Episcopal Church Fdn. 10/15/2010 5:11 PM **Federal Statements** 23-7361925 FYE: 12/31/2008 **Taxable Interest on Investments** Unrelated Exclusion Postal Business Code Description **Amount** Code Code Accrued interest 14 Interest 47,797 14 Total 47,797 **Taxable Dividends from Securities** Unrelated Exclusion Postal Description **Amount Business Code** Code Code Dividends 101,293 Total 101,293