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_	_	_	
Form		-	

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047 2008

Open to Public

inten		nue Service   Fine organization may have to use a copy of this return		<del></del>	<del></del> -		inspection
<u> </u>	For th		2008, and	ending	Decer	nber 31	, 20 08
		applicable Please C Name of organization Citychurch Outreach Minist	ry			, ,	yer identification number
$\sqcup'$	Address	change label or Doing Business As				90 E Toloob	0063224 one number
_	Name cl	nange type.	ess) hic	om/suite			
~	nıtıal ret	Specific 1 Ohi, and assessment and 7/D . 4				(806)	371-0089
닏	Termina	city or town, state or country, and ZIP + 4 thors.  Amarillo, TX 79101-1424					
$\sqcup'$	4mende	F Name and address of principal officer: Diana Lane				<b>G</b> Gross re	cerpts \$ 1,426,814
ء ليا	Application	ii perong 1					for affiliates? Lives Livino
_	T	205 S. Polk, Amarillo, TX 79101					included? Yes Vo
_		empt status:					list (see instructions)
_		te: > www.citychurchamarillo.com	1 Van et t			exemption nu	
		organization: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of 1	ornauon.	2000	M State o	f legal domicile: TX
Pa	irt I	Summary	V	Vo are c	ommitte	d to the i	orinciple that God
	1 !	Briefly describe the organization's mission or most significant ac has a purpose for every child regardless of their geographica	,	<b></b>			
8		race or culture. We are committed to transforming the disadv	+				
ᇤ		a commitment to children.	antayeu	Heighb	inoous	or our cr	y by making
Ę	-				04 . 6 %		
Activities & Governance		Check this box ► ☐ if the organization discontinued its operations or disponent		e than 25	76 OT ITS ES	1 - 1	7
<b>≪</b>	I	Number of voting members of the governing body (Part VI, line				. 3	5
ž	i	Number of independent voting members of the governing body	(Part VI, I	ine 1b)		5	16
疲		Total number of employees (Part V, line 2a)				. 6	800
ĕ	L .	Total number of volunteers (estimate if necessary)			• • •	7a	295
		Total gross unrelated business revenue from Part VIII, line 12, co Net unrelated business taxable income from Form 990-T, line 34				7b	
	<del>  "</del>	Net differenced business taxable income from Point 990-1, life 34	<u> </u>	<del></del>	Prior Ye		Current Year
		On the time and seconds (Don't VIII) line 4th	992,854	1,425,391			
9		Contributions and grants (Part VIII, line 1h)		· -		002,004	1,420,001
Revenue	1	Program service revenue (Part VIII, line 2g)		· ·		4,091	1,126
æ		nvestment income (Part VIII, column (A), lines 3, 4, and 7d) . Other revenue (Part VIII, column (A), lines 5, 6d, 8c; 9c; 10o, and	11a)	• •		(790)	297
	11 12	Total revenue—add lines 8 through 11 (must equal Part VIII, column	(A), line 12	<sup>57</sup> . ⊢		996,155	1,426,814
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>		·	0	9,752
	14	Panelta poid to ar for members (Part IV) salitme (A) didd(4)	31	` ∵ ─		0	0
8	15	Benefits paid to or for members (Part IX,\column (A), 1if(4)	- (A)			445,095	537,086
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	=    3 - 11	"		0	0
꿃	h.	Total fundraising expenses (Part IX, column (B) The 25) >					
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f).				559,868	797,845
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A)	line 25)	· -	1	,004,963	1,344,683
		Revenue less expenses. Subtract line 18 from line 12		: :  <u> </u>		(8,808)	82,131
5 8					Beginning (	of Year	End of Year
Selances	20	Total assets (Part X, line 16)		🗀	1	,051,339	1,002,881
₹ B	21	Total liabilities (Part X, line 26)				224,466	93,877
<u> 2,5</u>		Net assets or fund balances. Subtract line 21 from line 20				826,873	909,004
Pa	art II	Signature Block					
		Under penalties of perjury, I declare that I have examined this return, including according to the true competency of property and population of property (other than a					
		and belief, it is true, correct, and complete Declaration of preparer (other than of	Jilicol) is uas	sed on an i	inomiauon		eparer has any knowledge.
Sig	<u>ın</u>	N Want				≥ - 8 -	/!
He	re	Signature of officer			Dat	е	
		Diana Lane Director					
_		Type or print name and title					<del></del>
		Preparer's	Date	Check self-	· u	Preparer's i	dentifying number tions)
Paic	i	signature		emplo	yed ▶ 🛄	,====	
Pre	parer's	E-win arms (naverna)				<u> </u>	
	Only	Firm's name (or yours if self-employed),		<del></del>	EIN	<u> </u>	
		address, and ZIP + 4			Phone n	o. <b>▶</b> (	)
ма	y the	IRS discuss this return with the preparer shown above? (see ins	tructions)	<del></del>	· · ·		Yes No
Enz	Debroo	w Act and Panenwork Reduction Act Notice see the congrete instr	antions.		Cat No. 1:	12027	Error <b>990</b> 2002

Par	Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission: We are committed to the principle that God has a purpose for every child regardless of their geographical location, financial status, religious affiliation, race or culture. We are committed to transforming the
	disadvantaged neighborhoods of our city by making a commitment to children.
	disadvantages neighbornoods of our city by making a communicity to emission.
_	
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
_	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4-	(Code: ) (Expenses \$ 249,934 including grants of \$ ) (Revenue \$ 76,052)
48	Citychurch has a sunday worship service for children and families. Vans pick children up for breakfast and
	a children's service and youth service. Groceries are given away to families in attendance and sent home with
	children who attend. Durning the summer, Citychurch hosts the Jesus Loves You Celebration. It is a citywide
	crusade with preaching and music, food and fun. Hundreds are fed and ministered to.
	***************************************
4b	(Code: ) (Expenses \$ 243,819 including grants of \$ ) (Revenue \$ 354,450)
	Fill a bag, feed a child. At the CityKid Cafe volunteers prepare and deliver to the neighborhoods of Amarillo.
	Over 1000 lunches a day Monday through Thursday. Volunteers and Citychurch staff prepare each lunch. The
	lunches consist of a hot item, fruit, cookies, and popcorn. The bags are loaded into six different trailers and
	delivered to the neighborhoods that Citychurch ministers in. The lunch is usually met with a smile and excitement from the child who receives it. The children who receive the lunch begin to look forward to it and depend on it.
	Citychurch also host summer mission groups. Each year Citychurch hosts over 700 missionaries and volunteers
	who come here to learn about ministry to the inner-city. Lunches are also fed during spring break and some
	school holidays.
40	(Code: ) (Expenses \$ 228,309 including grants of \$ ) (Revenue \$ 337,080)
~	Citychurch has a weekly children's ministry called Kid's Night. During the fall, Winter and Spring semesters while
	the kids are in school we will be picking them up. "Kid's Night" will begin with a quick meal and then the kids
	are separated into classes. We will teach them using crafts, games and music. Durning the summer months,
	children are brought to our park on a weekly basis for bible lesson, games, lunch, snacks, and crafts. Each
	week of the summer different neighborhoods are targeted for the week long Bible club. Citychurch also fills the
	visable needs of the children that we minster to. Citychurch shops with children and youth that are involved
	in our summer ministry to meet their back to school needs. Citychurch also hands out Christmas boxes to
	children involved in our ministry. The boxes include a blanket, toys, hygiene items, socks, underware, and candy.
4d	Other program services. (Describe in Schedule O.) (Expenses \$ 376,751 including grants of \$ ) (Revenue \$ 657,809)
40	Total program service expenses > \$ 1.098.813 (Must equal Part IX. Line 25, column (B).)

Par	t V 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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	~	
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		~
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		V
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 Schedule D, Part I	6		<b>y</b>
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		v
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		v
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		V
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		~
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, IX, or X as applicable	11	~	
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		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		~
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		~
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, Part II	15		V
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		V
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		~
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		~
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		~
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		7
21	Did the organization report more than \$5,000 on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II	21	~	-
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		~
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 21b, 24d and complete School to K. If "No." on to question 25	248		,
	24b-24d and complete Schedule K. If "No," go to question 25	24b		1
b				
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>ر</u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		-
258	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		~
ь	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		"
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		"
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		,

ı u	Crieckies 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:			
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,	000		
	Part IV	28a		~
Ь	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		V
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		,
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		V
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		/
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		>
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		>
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		V
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		,
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 VI	37		~

Form **990** (2008)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			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			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
•	gaming (gambling) winnings to prize winners?	1c	<b>/</b>	
20	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	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 by			
	this return?	3a		~
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		~
b	if fes, enter the name of the foreign country.			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
C	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	_		
	Regarding Prohibited Tax Shelter Transaction?	5c		
	Did the organization solicit any contributions that were not tax deductible?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6Ь		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than			
	\$75?	7a		~
Ь	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			
	required to file Form 8282?	7c		~
	If "Yes," indicate the number of Forms 8282 filed during the year			
0	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	_		
_	benefit contract? , , , , , , , , , , , , , , , , , , ,	7e		7
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71	7	_
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h	l	
_	required?	-/''	•	
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section			
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring	8		~
9	organization, have excess business holdings at any time during the year?	<u> </u>		
8	Did the organization make any taxable distributions under section 4966?	9a		~
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		~
10	Section 501(c)(7) organizations. Enter:	-		
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  N/A			
11	Section 501(c)(12) organizations. Enter:	ł		
	Gross income from members or shareholders			
ь	Gross income from other sources (Do not net amounts due or paid to other sources against			
-	amounts due or received from them.)	]		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b   N/A			

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			
			Yes	No
	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.	ı		
1a	Enter the number of voting members of the governing body	1		1
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	] ,	:	
	any other officer, director, trustee, or key employee?	2	1	<u> </u>
3	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? .	3		1
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		1
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?	6		V
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		1
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
8		8a	~	
ь	Each committee with authority to act on behalf of the governing body?	8b	~	
9a	Does the organization have local chapters, branches, or affiliates?	9a		1
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?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		~
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at		- 1	
800	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		
<del>30</del> 0	tion B. Policies			
40-	Describe an extended to be a second to second to the secon	40-	Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	•	
D	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	12b	~	
	rise to conflicts?	120		
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		1
13	Does the organization have a written whistleblower policy?	13		~
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:		l	
8	The organization's CEO, Executive Director, or top management official?	15a		~
ь	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	. 1		
	with a taxable entity during the year?	16a		1
ь	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		1	
	the organization's exempt status with respect to such arrangements?	16b		
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c	)(3)s d	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 inte	rest	
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and reco organization: ▶ Diana Lane, 205 S. Polk, Amarillo, TX 79101 (806)371-0089		*bo	
	State the hame, physical address, and telephone number of the person who possesses the books and reco	ras oi	uie	

# 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.

☐ Check this box if the organization did not co	ompensate	any o	offic	er,	dire	ctor,	trus	stee, or key em	ployee.	
(A)	(B)			(	C)			(D)	(E)	(F)
Name and Title	Average		on (		k all	that ap		Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	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
Bill Duncan						<u> </u>	† <u> </u>			
7 Churchwell Dr., Bentonville, AK 72712	0	1		1		1		o	0	0
Don Lane										
205 S. Polk, Amarillo, TX 79101	30	1		1	~	1		43,456	21,242	0
Diana Lane										
205 S. Polk, Amarillo, TX 79101	40	~	_	~	~			31,012	0	0
Kelly Wood		İ				1	ŀ			
6505 Knollwood Dr., McKinney, TX 75070	0	~		~			<u> </u>	0	0	0
Charles Davenport	}_				ļ				_	_
301 Buffalo, Tulia, TX 79088	0	~	<u> </u>	<b> </b>	<u> </u>		ļ	0	0	0
Greg Lusk		١.								_
810 S. Avondale St., Amarillo, TX 79106  Dawnette Lusk	0	~	├	├	-	<del> </del>	<del> </del>	0	0	0
810 S. Avondale St., Amarillo, TX 79106	o	~						0	0	0
									-	

Part VII Section A. Officers, Directors,	rustees, Ke	'Emt	oloy	<del>00</del> 8	, en	d Hig	hes	t Compensate	d Employees (c	ployees (continued)				
(A)	(B)	_		•	C)			(D)	(E)	1.	(F)			
Name and title	Average hours per week	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	con	estimate imount other inpensati from the ganizati and relate ganizati	of tion te tion ted		
									-					
1b Total			<u> </u>			٠.	<b>•</b>	74,468	21,242	2		0		
2 Total number of individuals (including th	ose in 1a) wh	no rec	eiv	ed r	nore	e than	1 \$1	00,000 in repo	rtable compen	sation	from	the		
organization ▶ 0											[U]	N		
											Yes	No		
3 Did the organization list any former off							oyee	e, or highest c	compensated	3		1		
employee on line 1a? If "Yes," complete 4 For any individual listed on line 1a, is the										۳		Ť		
the organization and related organization														
individual						from a			onization for	4		~		
services rendered to the organization? It	"Yes," com	olete	Sch	edu	ile J	for s	uch	person	anization for	5		~		
Section B. Independent Contractors														
Complete this table for your five highest compensation from the organization.	compensate	d ind	epe	nde	nt o	contra	icto	rs that receive	d more than \$1	00,00	) of			
(A) Name and business	address							(B) Description of s	ervices		C) ensation	)		
N/A					_		_							
						-	-		-					
							$\vdash$							
								•						
2 Total number of independent contractor compensation from the organization ▶		those	in	1) w	/ho	receiv	ved	more than \$10	00,000 in					

Part	VII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns	0 0 0 0 0 0				
ဦ နိ		Noncash contributions included in lines 1a-1f: \$ . <b>Total.</b> Add lines 1a-1f		1,425,391			
Program Service Revenue	2a b c		Business Code				
Program (	e f g	All other program service revenue .  Total. Add lines 2a-2f					
	3	Investment income (including dividends other similar amounts)	🕨	1,126	1,126		
	5 6a	Royalties					
	d	Rental income or (loss)  Net rental income or (loss)  Gross amount from sales of assets other than inventory	▶ (ii) Other				
		Less: cost or other basis and sales expenses .  Gain or (loss)					
	d	Net gain or (loss)	<u> </u>	2			
er Revenue		Gross income from fundraising events (not including \$					
e de la composition della comp	b	Less: direct expenses <b>b</b> Net income or (loss) from fundraising e	vents ►				
		Gross income from gaming activities. See Part IV, line 19					
		Less: direct expenses b  Net income or (loss) from gaming activ					
	ь	Gross sales of inventory, less returns and allowances a Less: cost of goods sold b Net income or (loss) from sales of inventors.					
		Miscellaneous Revenue	Business Code				
	11a b		900003	295		295	
	C	All abbay rayanya					
		All other revenue	>	295			
		Total Revenue. Add lines 1h, 2g, 3, 4, 9c, 10c, and 11e		1426,814	1,126	295	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
er organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Do	All other organizations must complete column not include amounts reported on lines 6b.	(A)	(B)	(C)	(D)
	, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundralsing 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 the U.S. See Part IV, line 22	9,752	9,752		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	74,468	34,493	35,475	4,500
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	381,834	328,770	36,952	16,112
7	Other salaries and wages				<del></del>
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	69,356	55,207	11,028	3,121
9	Other employee benefits	11,428	7,415	4.013	3,121
10	Payroll taxes	11,420	7,713	4,013	
11	Fees for services (non-employees):		1		
	Management				
	Accounting				
d					
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
	Other				
12	Advertising and promotion	706		706	
13	Office expenses	24,515		24,515	
14	Information technology				<del></del>
15	Royalties				
16	Occupancy	9,000	9,000	·· , .,	·
17	Travel	19,110	13,326	5,784	
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	9,021		9,021	
21	Payments to affiliates			-	· - · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization .	82,812	75,266	6,365	1,181
23	Insurance	25,777	25,777		
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.)				
8	Schedule 0	626,904	539,807	60,201	26,896
b					
C					
d				· · · · · · · · · · · · · · · · · · ·	
8	Atl ather and a			* -	
25	All other expenses	1,344,683	1,098,813	194,060	E1 010
25 26	Total functional expenses. Add lines 1 through 24f  Joint Costs. Check here ▶ ☐ if following	1,344,003	1,030,013	194,000	51,810
	SOP 98-2. 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> (2008)

Pa	rt X	Balance Sheet					
			(A) Beginning of year		End o	B) of year	,
	1	Cash—non-interest-bearing	87,149	1		6	1,797
	2	Savings and temporary cash investments	82,621	2		9	5,806
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net		4			
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5			
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6			
æ	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use		8			
₹	9	Prepaid expenses and deferred charges  Land, buildings, and equipment: cost basis   10a   1,284,185		9			
	10a	Land, buildings, and equipment: cost basis 10a 1,284,185					
	ь	· · · · · · · · · · · · · · · · · · ·	881,458	10c		84	5,165
	11	Investments—publicly traded securities	111	11			113
	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		15			
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,051,339			1,00	2,881
Liabilities	17	Accounts payable and accrued expenses	9,676	17			3,343
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
	21	Escrow account liability. Complete Part IV of Schedule D		21	<del></del>		
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22			
	23	Secured mortgages and notes payable to unrelated third parties	211,518			8	7,863
	24	Unsecured notes and loans payable		24			<del>.,</del>
	25	Other liabilities. Complete Part X of Schedule D	3,272				2,671
	26	Total liabilities. Add lines 17 through 25	224,466				3,877
Balances		Organizations that follow SFAS 117, check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.					
a	27	Unrestricted net assets	767,094	27		84	1,587
Ba	28	Temporarily restricted net assets	59,779	28		6	7,417
פ	29	Permanently restricted net assets		29			
Net Assets or Fur		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.					
g	30	Capital stock or trust principal, or current funds		30			
386	31	Paid-in or capital surplus, or land, building, or equipment fund		31			
Ā	32	Retained earnings, endowment, accumulated income, or other funds		32			
Š	33	Total net assets or fund balances	826,873	33			9,004
	34	Total liabilities and net assets/fund balances	1,051,339	34		1,002	<u> 2,881</u>
Pa	rt XI	Financial Statements and Reporting	<del> </del>	-			
1	Acc	ounting method used to prepare the Form 990:   Cash  Accrual	☐ Other			Yes	No
<b>2</b> a		e the organization's financial statements compiled or reviewed by an inde	ependent accountant	?	2a		8
		e the organization's financial statements audited by an independent acco	•		2b	<u> </u>	8
		es" to lines 2a or 2b, does the organization have a committee that assumes i		ight of			
		audit, review, or compilation of its financial statements and selection of an inc			2c	<b> </b>	<b></b>
	the S	a result of a federal award, was the organization required to undergo an a Single Audit Act and OMB Circular A-133?	. <b>.</b>		3a		<b>V</b>
b	If "Y	es," did the organization undergo the required audit or audits?	<u></u>		3b		

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

## **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 Internal Revenue Service Name of the organization Employer Identification number Citychurch Outreach Ministry **Q** 0063224 Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3 % 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% % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a ☐ Type I **b** ☐ Type II c ☐ Type III—Functionally integrated d ☐ Type III-Other e D By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(j) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? . . . . (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . . . |11g(iii) Provide the following information about the organizations the organization supports. (II) EIN (iii) Type of organization (i) Name of supported (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of organization the organization in organization in col. above or IRC section governing document? cot. (i) of your (i) organized in the (see instructions)) support? U.S.? Yes No Yes Yes No No

Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Catendar 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 459,353 752,839 1,090,811 992,854 1,425,391 4,721,248 include any "unusual grants.") 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 459,353 752.839 1.090.811 992,854 1,425,391 4,721,248 Total. Add lines 1-3 . . . . . . 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 750.093 shown on line 11, column (f) 3.971,155 Public support. Subtract line 5 from line 4. Section B. Total Support (e) 2008 Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (f) Total 459,353 992.854 752.839 1.090.811 1.425.391 4,721,248 Amounts from line 4 . . . . 7 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 4,091 690 1,126 5,907 sources . . . 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 252 279 382 293 297 1,503 (Explain in Part IV.) 4,728,658 11 Total support. Add lines 7 through 10 . 4,727,155 12 Gross receipts from related activities, etc. (see instructions) . . . . . . . . . . . . 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 84 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 % 14 77 15 % Public support percentage from 2007 Schedule A, Part IV-A, line 26f . . . . . . . . 15 16a 331/3 % support test - 2008. If the organization did not check the box on line 13, and line 14 is 331/3 % or more, check this box b 331/3 % support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this 17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . . . . . . . . b 10%-facts-and-circumstances test-2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . . . . . Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions >

Schedule A (Form 990 or 990-EZ) 2008

Par	Support Schedule for Orga				1)(2)			
<u> </u>	(Complete only if you checke tion A. Public Support	ed the box on	iline 9 of Pa	IT 1.)				
	dendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	1 (0)	2008	(f) Total
-	actual year (or notes year beginning in)	(a) 2004	(b) 2000	(0) 2000	(4) 2007	<i> </i>	2000	(i) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	N/A						
2	Gross receipts from admissions, merchandise					1		
	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		· · · · · · · · · · · · · · · · · · ·					
3	Gross receipts from activities that are not an unrelated trade or business under section 513						<del></del>	
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1-5					<del>├</del> ──		
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .					ļ	<del> </del>	
b	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							
C	Add lines 7a and 7b				<u> </u>	ļ		
8	Public support (Subtract line 7c from line 6.)					ļ		
_	tion B. Total Support				F			
Ca	dendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e	2008	(f) Total
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
ь	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 carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
13	Total support. (Add lines 9, 10c, 11, and 12.)							
14	First five years. If the Form 990 is for organization, check this box and stop			nd, third, fourth	n, or fifth tax y	ear a	a section	on 501(c)(3)
Sec	tion C. Computation of Public Su							
15 16	Public support percentage for 2008 (lir Public support percentage from 2007 st				(f)	15 16		<u>%</u>
_	tion D. Computation of Investmen				··			, , , , , , , , , , , , , , , , , , ,
17	Investment income percentage for 200			d by line 13, c	olumn (f)) .	17		%
18	Investment income percentage from 20	007 Schedule A	, Part IV-A, iii	ne 27h		18		%
19a	33% % support tests – 2008. If the org 17 is not more than 33% %, check this b	anization did no ox and <mark>stop he</mark>	ot check the b ire. The organ	ox on line 14, a ization qualifies	as a publicly	suppo	rted orga	unization ► 🗆
b	331/3 % support tests - 2007. If the organine 18 is not more than 331/3 %, check this							
20	Private foundation. If the organization		-	•			_	_

Schedule A (F	om 990 or 990-E∠) 2008	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanation required by Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see	Part II. line 10:
		,,
		***************************************
		***************************************
		***************************************
		***************************************
		***************************************
		•••••••
		***************************************

#### SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

	of the organization			ployer identification number
	church Outreach Ministry		90	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Pa	Organizations Maintaining Donor the organization answered "Yes" to			
		(a) Donor advised funds	(t	) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)		<del></del>	· · · · · · · · · · · · · · · · · · ·
4	Aggregate value at end of year			
5	Did the organization inform all donors and do funds are the organization's property, subject			
8	Did the organization inform all grantees, dono used only for charitable purposes and not for impermissible private benefit?	the benefit of the donor or donor adv	isor or oth	ner
Do	t II Conservation Easements. Complet	a if the examination answered "Yes	" to Form	Yes No
				1990, Part IV, line 7.
2	Purpose(s) of conservation easements held by Preservation of land for public use (e.g., re Protection of natural habitat Preservation of open space Complete lines 2a–2d if the organization held a on the last day of the tax year.	ecreation or pleasure)	on of an h ion of cer	istorically important land area tifled historic structure a conservation easement
	on the last day of the last year.			Held at the End of the Year
_	Total number of conservation easements			2a
h	Total acreage restricted by conservation ease			2b
b	Number of conservation easements on a certi			2c
d	Number of conservation easements included	• • • • • • • • • • • • • • • • • • • •		2d
3	Number of conservation easements modified, the taxable year ▶			
4	Number of states where property subject to c	conservation easement is located >		
5	Does the organization have a written policy re enforcement of the conservation easements it	garding the periodic monitoring, inspe	ection, vio	lations, and
8	Staff or volunteer hours devoted to monitoring	g, inspecting, and enforcing easement	e during t	he year▶
7	Amount of expenses incurred in monitoring, in	nspecting, and enforcing easements d	uring the	year▶ \$
8	Does each conservation easement reported o $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(ii)$ ?			
9	In Part XIV, describe how the organization repbalance sheet, and include, if applicable, the tree organization's accounting for conservation	text of the footnote to the organization	/enue and n's financi	expense statement, and all statements that describes
Pai	till Organizations Maintaining Collect Complete if the organization answer	ions of Art, Historical Treasures, o		Similar Assets.
1a	If the organization elected, as permitted under art, historical treasures, or other similar assets provide, in Part XIV, the text of the footnote to	held for public exhibition, education, or	research	in furtherance of public service,
Ь	If the organization elected, as permitted under historical treasures, or other similar assets he provide the following amounts relating to thes	ld for public exhibition, education, or r		
	(i) Revenues included in Form 990, Part VIII,			
	(ii) Assets included in Form 990, Part X			. > \$
2	If the organization received or held works of following amounts required to be reported un		lar assets	for financial gain, provide the
a	Revenues included in Form 990, Part VIII, line			
ь	Assets included in Form 990, Part X			. > \$

Page	2

Schedule D	(Form 990) 2008
Part III	Organizati

Par	1 III Organizations Maintaining (	Collections	of Art, H	istoric	al Treasures	, or C	Other Similar A	<b>Lesets</b> (co	ontinuec	2
3	Using the organization's accession and items (check all that apply):	other records	s, check :	any of	the following	that a	re a significant	use of its	collection	'n
8	Public exhibition		d		oan or excha					
b	Scholarly research		0		Other					
C	Preservation for future generations									
4	Provide a description of the organization Part XIV.	n's collections	and exp	lain ho	w they further	r the c	rganization's ex	empt pur	pose in	
5	During the year, did the organization solici assets to be sold to raise funds rather tha	t or receive de n to be mainte	onations o	f art, hi	storical treasure organization	res, or n's coll	other similar ection?	□ Ye	s 🔲 N	<u> </u>
Par	t IV Trust, Escrow and Custodia Part IV, line 9, or reported an	i Arrangeme amount on	ents. Cor Form 990	nplete ), Part	if organizatio X, line 21.	n ans	wered "Yes" to	Form 99	90, 	
	Is the organization an agent, trustee, cuincluded on Form 990, Part X?					ons o	r other assets n	ot 🗌 Ye	e □ N	0
Ь	If "Yes," explain the arrangement in Par	t XIV and cor	nplete the	follow	ing table:		<del></del>			_
						-		Amount		_
c	Beginning balance						<del></del>			_
d	Additions during the year					. 10	L.			
e	Distributions during the year					. <b>1</b> e	_			
f	Ending balance					. 11				
2a b	Did the organization include an amount if "Yes," explain the arrangement in Par	on Form 990	), Part X,	line 211				∐ Y€	98   N	<u> </u>
Par	t V Endowment Funds. Comple	ete if organi	zation ar	nswere	d "Yes" to f	orm	990, Part IV, li	ne 10.		_
	(a	) Current year	(b) Pric	or year	(c) Two years	back	(d) Three years bad	k (e) Four	years bac	<u>.                                    </u>
1a	Beginning of year balance									
ь	Contributions									
c	Investment earnings or losses .									$\Box$
d	Grants or scholarships									$\Box$
8	Other expenditures for facilities and programs									
f g	Administrative expenses End of year balance									-
	Provide the estimated percentage of the	a year and ha	lance hel	d as:			<u> </u>		-	
2	Board designated or quasi-endowment			u as.						
8	Permanent endowment		/0							
b	Term endowment ▶%	70								
C		annalan of th		طف سماغت	et ara balal ar	-d -d-	ainistared for the			
3 <b>a</b>	Are there endowment funds not in the poorganization by:	ssession or u	ie organiz	auon u	at are rield ar	iu aun	illustered for the	<b>'</b>	Yes N	5
								3a(i)		_
	(ii) related organizations							3a(ii)		_
h	If "Yes" to 3a(ii), are the related organizations	ations listed	 as require	d on S	chedule R?			3b		_
4	Describe in Part XIV the Intended uses	of the organiz	zation's e	ndowm	ent funds.					
Pai	t VI Investments—Land, Buildi	ngs, and Ec	uipmen	t. See	Form 990, P	art X,	line 10.			_
	Description of investment	(a) Cost or or (Investm	ther basis	(b) C	ost or other sis (other)		Depreciation	(d) Boo	k value	
<u> </u>	Land	72,5	71		Cost			72,	571	_
18	Land	344.7			/30 yrs		54,971	289,		_
Ь	Buildings	1	-				<del></del>			
C	Leasehold improvements	393,6	97	S	LVAR		257,103	136,	594	_
d	Equipment	473,1			LVAR		126,946	<u>.</u>	220	
E Tota	II. Add lines 1a-1e. (Column (d) should equa						>		845,16	5
	ar the lines to to to localiti lay allocald aqua.		, 00.01			<u> </u>		edule D (For		_

Schedule D (Form 990) 2008			Page
Part VII Investments—Other Securities	s. See Form 990, Part X,	line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year m	uation. arket value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
•			
			· · · · · · · · · · · · · · · · · · ·
***************************************			· · · · · · · · · · · · · · · · · · ·
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments—Program Relate	d See Form 990 Part V	line 13	
		1	
(a) Description of investment type	(b) Book value	(c) Method of valu Cost or end-of-year m	uation: arket value
			·
			<del> </del>
Total. (Column (b) should equal Form 990, Part X, col. (8) line 13.)			
Part IX Other Assets. See Form 990, Pa	rt X, line 15.		
	(a) Description		(b) Book value
			,
<u> </u>			
			†
			1
			<del> </del>
Total. (Column (b) should equal Form 990, Part X, co.	I /R) line 15 )		
Part X Other Liabilities. See Form 990,		· · · · · · · · · · · · · · · · · · ·	I
(a) Description of liability	Y <del></del>	1	
Federal income taxes	(b) Amount		
Payroll Taxes Payable	2.67	<del>_</del>	
rayion lakes rayable	2,67	4	
<del></del>	ļ <u> </u>	_	
		-	
		_	
		_	
		7	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.) ▶	2,67	শ	
	<del></del>		

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.

It XI Reconciliation of Change in Net Assets from Form 990	to Financial Stater	nents	
Total revenue (Form 990, Part VIII, column (A), line 12)		4	
Total expenses (Form 990, Part IX, column (A), line 25)		2	
Excess or (deficit) for the year. Subtract line 2 from line 1		3	
Net unrealized gains (losses) on investments		4	
Donated services and use of facilities		5	
Investment expenses		6	
Prior period adjustments		. 7	
Other (Describe in Part XIV)		. 8	
Total adjustments (net). Add lines 4-8		. 9	
Excess or (deficit) for the year per financial statements. Combine lines			
t XII Reconciliation of Revenue per Audited Financial Sta		1 . 1	
Total revenue, gains, and other support per audited financial statement	nts	1	
Amounts included on line 1 but not on Form 990, Part VIII, line 12:	l en l		
Net unrealized gains on investments	28		
Donated services and use of facilities	2b	<b> </b>	
Recoveries of prior year grants	2c   2d		
Other (Describe in Part XIV) ,			
Add lines 2a through 2d		3	
Subtract line 2e from line 1	i	3	
Amounts included on Form 990, Part VIII, line 12, but not on line 1:	4a		
Investment expenses not included on Form 990, Part VIII, line 7b .	4.	<del> </del>	
Other (Describe in Part XIV)		4c	
Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, Iir			
1 XIII Reconciliation of Expenses per Audited Financial St			
		1	
Amounts included on line 1 but not on Form 990, Part IX, line 25:		' '	
Donated services and use of facilities	2a		
Prior year adjustments	2b		
	2c		
Losses reported on Form 990, Part IX, line 25			
Losses reported on Form 990, Part IX, line 25	2d		
Other (Describe in Part XIV)		2е	
Other (Describe in Part XIV)		2e 3	
Other (Describe in Part XIV)		· · <del>  </del>	
Other (Describe in Part XIV)		· · <del>  </del>	
Other (Describe in Part XIV)		· · <del>  </del>	
Other (Describe in Part XIV)	4a	· · <del>  </del>	
Other (Describe in Part XIV)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIV)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part	4a 4b	3	
Other (Describe in Part XIV)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIV)  Add lines 4a and 4b	4a 4b	3	
Other (Describe in Part XIV)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIV)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part	4a 4b rt I, line 18.)	3 	1b
Other (Describe in Part XIV)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part iX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIV)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part XIV Supplemental Information	4a 4b	3 4c 5 1a and 4; Part IV, lines	1b
Other (Describe in Part XIV)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIV)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part XIV Supplemental Information  plete this part to provide the descriptions required for Part II, lines 3, 5	4a 4b  rt I, line 18.)  5, and 9; Part III, lines Part XIII, lines 2d and	3 4c 5 la and 4; Part IV, lines 4b.	1b
Other (Describe in Part XIV)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIV)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part XIV Supplemental Information  plete this part to provide the descriptions required for Part II, lines 3, 5  2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and	4a 4b  rt I, line 18.)  5, and 9; Part III, lines Part XIII, lines 2d and	3 4c 5 la and 4; Part IV, lines 4b.	1b
Other (Describe in Part XIV) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part iX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part XIV Supplemental Information eplete this part to provide the descriptions required for Part II, lines 3, 5 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and	4a 4b  rt I, line 18.)  i, and 9; Part III, lines Part XIII, lines 2d and	3 4c 5 1a and 4; Part IV, lines 4b.	
Other (Describe in Part XIV)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIV)  Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part XIV Supplemental Information  plete this part to provide the descriptions required for Part II, lines 3, 5  2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and	4a 4b  rt I, line 18.)  i, and 9; Part III, lines Part XIII, lines 2d and	3 4c 5 1a and 4; Part IV, lines 4b.	
Other (Describe in Part XIV) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part iX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part XIV Supplemental Information eplete this part to provide the descriptions required for Part II, lines 3, 5 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and	4a 4b  rt I, line 18.)  5, and 9; Part III, lines Part XIII, lines 2d and	3 4c 5 1a and 4; Part IV, lines 4b.	
Other (Describe in Part XIV) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part iX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part XIV Supplemental Information eplete this part to provide the descriptions required for Part II, lines 3, 5 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and	4a 4b  rt I, line 18.)  5, and 9; Part III, lines Part XIII, lines 2d and	3 4c 5 1a and 4; Part IV, lines 4b.	
Other (Describe in Part XIV) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part iX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part XIV Supplemental Information eplete this part to provide the descriptions required for Part II, lines 3, 5 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and	4a 4b  rt I, line 18.)  i, and 9; Part III, lines Part XIII, lines 2d and	3 4c 5 5 1a and 4; Part IV, lines 4b.	

Schedule D (Form	n 990) 2008 Pag	<sub>je</sub> 5
Part XIV	Supplemental Information (continued)	
		••••

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.

▶ Attach to Form 990.

Ope'n to Public Inspection

ž (h) Purpose of grant or assistance 2 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. Use Employer identification number 0063224 □ Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and . . . . . . . . . . . . . . (g) Description of non-cash assistance 8 (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance . (d) Amount of cash grant Part IV and Schedule I-1 (Form 990) if additional space is needed Enter total number of section 501(c)(3) and government organizations (c) IRC section if applicable the selection criteria used to award the grants or assistance? Part I General Information on Grants and Assistance B EIN Enter total number of other organizations 1 (a) Name and address of organization or government Citychurch Outreach Ministry Name of the organization Part II M

Schedule I (Form 990) 2008

Cat. No. 50055P

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Page 2

Schedule | Form 990) 2008

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

Use Schedule I-1 (Form 990) if additional space is needed	tional space is n	æded.			
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Paid Utility bill for families	5	965			
Bought clothing for children.	2	700			
Bought grocerles for family.	-	177			
Bought shoes for children.	32	645			A THE PARTY OF THE
Paid travel expense for Individual.	-	#			
Paid rent for families.	2	1,025			
厥	-	2,647			
Saggive Supplemental militarion. Complete this part to provide the militarion required in Fart 1, and any outer additional militarion.					מכתוניסומ ווויסווומוסוי.
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				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;			

Page 2

Schedule I (Form 880) 2008

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Use Schedule I-1 (Form 990) if additional space is needed.

Use Scriedure I-1 (FOILL 330) II AUGINOTIAI SPACE IS LIEGUED	IIOIIai space is iii	aegen.	:		
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Paid funeral expenses for family.	+	2,922			
Paid fees for Individual.	+	39			
Bought glasses for individual	1	232			
Bought bedding for family (lost house in fire.)	1	323			
Part IV Supplemental Information. Complete this	_	ovide the information	on required in Part	, line 2, and any other	part to provide the information required in Part I, line 2, and any other additional information.
		; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
			9 9 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 2 3 3 4 4 4 4 4 4 1 1 1 1 1 1 1 1 1 1 1 1	
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#### SCHEDULE O (Form 990)

## Supplemental Information to Form 990

20**08** 

Open to Public Inspection

Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization ▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

0063224 Citychurch Outreach Ministry 90 Part VI Line 2: Two key employees who are related to each other through family are husband and wife Don Lane and Diana Lane. They are also directors listed on Part VII. The two directors Greg and Dawnette Lusk are husband and wife. Part VI Line19: The organization has governing documents, conflict of interest policy, and financial statements in its office, and they are available for public view upon request. Part III 4d. (Code ) (Expense \$222,230) (Revenue \$328,904) Citychurch has a youth program to reach junior high and high school aged children in the disadvantaged neighborhoods of Amarilio. Youth are picked up from the middle schools and high schools once a week and brought to the church for a cafe style meal, music, games and Bible study. Each year Citychurch takes the students on a summer retreat to get them away from the pressures of the inner-city. (Code ) (Expense \$154,521) (Revenue \$328,905) The goal of the television and internet ministry is to inspire others to reach out to the hungry and lost children of their own city. The documentary style programing offered on the television program and streaming on the internet shows how to help others in need. The message of the show is an outreach to people who cannot attend Citychurch because of geographic location or disability.

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Schedule	0	Form	990	2008
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Name of the organization Citychurch Outreach Ministry	,				Employer identification number 90 0063224
Part IX Line #24 Other Exper					
and Line #24 Other Exper		/P)Orogram	(C)Mamt	(D)Eund	
	(A)Total	(B)Program	(C)Mgmt	(D)Fund	
Contract Labor	\$ 84,842	61,129	23,713		
Repair and Maintenance	103,514	103,514			
[elephone	23,339	17,504	5,835		
Jtilities	61,071	61,071			
Auto-Rep, Ins., Reg	21,907	21,907			
Equipment Rental	15,350		15,350		
Postage and Delivery	18,282		4,571	13,711	
Printing and Reproduction	3,690			3,690	
Television,internet Outreach	113,947	104,452		9,495	
Public Relations	2,867		2,867		
Supplies: Food	69,348	69,348			
reaching Supplies	5,913	5,913			
Music Supplies	9,196	9,196			
Other Ministry Supplies	17,553	17,553			
Ministry Supplies: Fuel	19,752	19,752			
Volunteer Support	3,606	1,714	1,892		
Christmas Boxes	7,469	7,469			
Activities	14,670	14,670			
Equipment-minor	1,852	1,852			
Security	1,514		1,514		
Mission Support	22,763	22,763			
Miscellaneous	4,459		4,459		
••••••					
rotal	\$ 626,904	539,807	60,201	26,896	••••••
	Ψ <b>020,304</b>				