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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

Department of the Treasury

Open to Public

		e Service		The organization m		a copy o					rements			espection	
A F	or the	2008 calend	ar year, c	or tax year beginni				2008	and en	ding			-31 , 2 (
B c	heck if ap	plicable	Please use IRS	C Name of organization	GLOBAL CO	MPASSI	ONS MINI	STRIES				¤	Employe	r identification	no
□ A	ddress ch	nange	label or	Doing Business As									26-110	4353	
∐ м	ame chai	nge	print or type.	Number and street (or	PO box if mail is	not delivered	d to street addres	s)		Room/s	suite	E	Telephon	e number	
In	ıtıal retun	n	See	3205 BUCKSK	IN PATH							L	(314)7	95-5363	}
<u></u>	erminatio	n	Specific Instruc-	City or town, state or	country, and ZIP +	4						G	Gross red	eipts \$	
∐ A	mended i	retum	tions	SAINT CHARL					_	,				114,8	844
∐ A	pplication	pending	F Name	and address of principal c	fficer MARK	SCOTT				H(a)	s this a or	oup retu	m for		_
				ESPACE CT, 1	LORISSANT	r, MO 6	3034				s this a gr affiliates?			∐ Yes X	No
	ax-exemp		X 501(c) (3) ◀ (insert no) 4947(a)((1) or	527			⊣ ''' ∣	Are all affil f "No." atta	ach a list	t (see instru	Yes lictions)	No
		► N/A								H(c)	Group exe	mption n	number	<u> </u>	
			Corporation	Trust Associa	tion Other	<u> </u>		L Year of form	ation 20	07	M State of	of legal d	domicile	MO	
Par		Summar	•												
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		_		s taxable income froi								7b	 -		
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S e	17	Other expen	ses (Part l	IX column (A) lines	11a 11d 111-2	24f)		$\breve{\mathcal{C}}$ $\left\{ \dots \right\}$			2	,136		8,2	245
S	18	Total expens	ses Add I	ines 13-17 (must eq es Subtract line 18	ual Pan X, col	ս <u>րոր (A), ի</u>	ine 25) ີ	<u>/ </u>	[119	,313		123,0	089
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Assets or	20	Total assets	(Part X, III	ne 16)		GDE	<u> 14. U 1</u>	إ			(4	,469)	(8,	245
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ances		Net assets o	or fund bala	ances Subtract line	21 from line 20	<u> </u>	· · · · · ·		<u> _</u>		(4	,469)	(8,	245
Pai	111	Signatu													
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_	Statement of Program Service Accomplishments (see instructions)
	······································
1	Briefly describe the organization's mission
	TO RAISE FUNDS TO HELP THE NATION OF HAITI WITH BASIC NEEDS SUCH AS FOOD, HEALTH AND
	VOCATIONAL TRAINING IN AN EVANGELISTIC WAY
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
_	
4a	(Code:) (Expenses \$ 114,844 including grants of \$ 114,844) (Revenue \$)
	TRIPS TO HAITI TO BUILD BUILDINGS AND TO PROVIDE FOOD. ALSO TRIP TO HONDURAS TO PROVIDE
	INFORMATION AND ITEMS TO HELP WITH FARMING
4h	
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ \$ 114,844 (Must equal Part IX, Line 25, column (B))
-	

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," Х 2 Is the organization required to complete Schedule B, Schedule of Contributors? X Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 3 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete 4 Χ Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) 5 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 X 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 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Х 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," 9 10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, 12 Did the organization receive an audited financial statement for the year for which it is completing this return 12 Х 13 Is the organization a school described in section 170(b)(1)(A)(u)? If "Yes," complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the U.S? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, 14b X business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I 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 X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 16 to individuals located outside the United States? If "Yes," complete Schedule F, Part III Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I 17 17 X 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 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 19 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 21 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 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 23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete X 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 Х 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c 24d **d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified 25b 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 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

Part IV Checklist of Required Schedules (continued)

During the tax year, did any person who is a current or former officer, director, trustee, or key employee 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,		28a		
employee), or an indirect business relationship through ownership of more than 35% in another entity		28a		
		28a		
(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,		28a		1
		28a		i
Part IV				
b Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"				
complete Schedule L, Part IV	r	28ь		İ
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		1
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	[29		X
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	-			
conservation contributions? If "Yes," complete Schedule M		30		
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	Ī			
Part I		31		1
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	Ī			
Schedule N, Part II		32		
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	Ī			
sections 301 7701-2 and 301.7701-3 ² 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		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	Ì			
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	Ì			
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part				i
VI		37		
EEA		Form	990 (2	2008

Form 990 (2008)
Part V St OB) GLOBAL COMPASSIONS MINISTRIES

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		Ī	
	U.S. Information Returns Enter -0- if not applicable			
Þ	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
_	gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
_	Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2Ь	X	
	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		<u>X</u>
b	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		l	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
Ь	If "Yes," enter the name of the foreign country.	1		
	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		<u>X</u>
Þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	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		32
6a	Did the organization solicit any contributions that were not tax deductible?	6a		<u>X</u>
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_		3.7
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		<u>X</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7c		v
_	required to file Form 8282?	,,,		X
đ	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	_ 1		v
		7e 7f		<u>X</u>
t -	Did the digatization, dating the year, pay promitting, another in managing of the personal pe			X
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
п	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		Х
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			
	organization, have excess business holdings at any time during the year?	8		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	•		
a	Did the organization make any taxable distributions under section 4966?	9a		Х
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
 а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
-	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ĺ
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

Section A. Governing Body and Management

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

			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			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent 1b 0			
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		Х
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		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	_7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7ь		Χ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	1		
	the year by the following	1		
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	7.5
9a	Does the organization have local chapters, branches, or affiliates?	9a		<u>X</u>
Ь	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	40	v	
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Х	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at	11		Х
500	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O:tion B. Policies	- '''		
<u> </u>	RIOIT D. FOIICIES		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	-140
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
•	describe in Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		X
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			
а	The organization's CEO, Executive Director, or top management official?	15a	Х	
b	Other officers or key employees of the organization?	15b	Х	
	Describe the process in Schedule O (see instructions)			7. 1. 1
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?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		X
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ MO			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
4.5	Own website Another's website W Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
22	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 records of the			
	organization MARK SCOTT (314)795-5363 3205 BUCKSKIN PATH SAINT CHARLES, MO 63301			

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)	(c)						(D)	(E)	(F)
Name and Title	Average	erage Position (check all that apply)						Reportable	Reportable	Estimated
	hours per week	I t d l r r l d u s e c l e e c r l e e r l e e r l e e r l e e r l r	1 n s t - t U t - o n a -	000-	Кеуебріоуее	H c e m p l o y e n s s e e t e d	r m	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
TERRY ESTES				v						
CHAIRMAN	15	+		X			├-	0	0	0
JIM WILCOX				٦,						
VICE CHAIRMAN	15	+		X	_		├-	0	0	0
BRUCE HILL	1.5			v			İ	1	0	0
SECRETARY	15	-		Х			\vdash	0		<u> </u>
MARK SCOTT	15			X				0	o	0
TREASURER	15	+		Λ		 	 			<u> </u>
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Form **990** (2008)

	` (A)	(B)			(C)				(D)	(E)	-	(F)	-
	` Name and title	Average	Positi	on (ch	neck a	all that	t		Reportable	Reportable	Estim		∍d
		hours	арріу				,		compensation	compensation		amount	of
		per	l t d	l t	0	K e e m	H c e	F o	from	from		other	
		week	dur		ı f	yР	g p P	r	the	related	٥	compens	ation
			y t c	l t		0	h e l e n o	m e	organization	organizations		from t	.he
			d et	t e		y	s s y	r	(W-2/1099-MISC)	(W-2/1099-MISC)		organiz	ation
			u r	0	Ί	9	6 8					and rel	ated
			l r	n a			d					organiza	tions
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ь т	otal			•		•		>	0	C	,		0
	otal number of individuals (including those in 1a) wh			-					e compensation fro	m the			
0	ganization >												
											····	Yes	No
	d the organization list any former officer, director of	-		-		_		-				†	1,
	mployee on line 1a? If "Yes," complete Schedule J										. 3		X
	or any individual listed on line 1a, is the sum of repo											ļ	
	e organization and related organizations greater the dividual							JI U J	IOI SUCII		4	Ŧ	X
	id any person listed on line 1a receive or accrue co							· ·	for		+		1.2
	ervices rendered to the organization? If "Yes," comp						-				5	t	X
	on B. Independent Contractors	picto concada	0 101	-	PO			<u> </u>					1
	omplete this table for your five highest compensate	ed independen	contr	acto	rs th	at re	ceived	moi	re than \$100,000 o	f			
	ompensation from the organization	•								_			
	(A)								(B)			(C)	
	Name and business addre	ss							Description of s	ervices	Com	pensatio	<u>n</u>
									1	1			
													
												_	

Page 9

Part '	VIII	Statement of Revenue		_		
	1	,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
C g o a	1a	Federated campaigns 1a		revenue	1	512, 513, or 514
ního	Ь	Membership dues 1b	.		‡	
rs, rn	C	Fundraising events 1c 114,844			f .	
b g s s	d	Related organizations 1d	.		1	
tam	e	Government grants (contributions) 1e	.		1	
011	f	All other contributions, gifts, grants, and]	
nsa s, r		similar amounts not included above	ļ		<u> </u>	
a n	g	Noncash contributions included in lines 1a-1f \$	·			
d	h	Total. Add lines 1a-1f	114,844		:	
		Business Code				
	2a		7	ĺ		
P S R r e e	ь					
0 r v	c	· · ·	 			
gve	d					<u> </u>
a c u	_		 			
m e e		All other program convenies revenue	- 	-		·
	1	All other program service revenue				
		Total. Add lines 2a-2f		<u> </u>		
	3	Investment income (including dividends, interest, and				
		other similar amounts)				
	4	Income from investment of tax-exempt bond proceeds ▶				
	5	Royalties				
		(i) Real (ii) Personal				
	6a	Gross Rents			‡	
	b	Less: rental expenses			1	
	C	Rental income or (loss)	-		‡	
	d	Net rental income or (loss)]	1	
		Gross amount from sales of (i) Secunties (ii) Other				
	'-	assets other than inventory	7		1	
	ь	Less: cost or other basis	7			
0		and sales expenses	_		[
t	С	Gain or (loss)			ŧ	
h	d	Net gain or (loss)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
r	8a	Gross income from fundraising	-		1	
_	1	events (not including \$\$				
R e		of contributions reported on line 1c).				
v		See Part IV, line 18	-		ł	
e	ь	Less direct expenses b			Ī	
n u	С	Net income or (loss) from fundraising events	,	1		
ė	9a	Gross income from gaming activities				
		See Part IV, line 19			1	
	Ь	Less direct expenses b	7		1	
		Net income or (loss) from gaming activities	,		†	
	1	Gross sales of inventory, less				
		returns and allowances	į		<u> </u>	
	Ь	Less cost of goods sold b	7		1	
	1	Net income or (loss) from sales of inventory				
		Miscellaneous Revenue Business Code			·	
	11a		=			İ
	Ь			-		
	-				 	
	<u>-</u> د	All other revenue	- -	 		
				 	 	
	1	Total. Add lines 11a-11d · · · · · · · · ▶	·	<u> </u>	 	<u> </u>
	12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c,				_
	1	9c, 10c, and 11e	114,844		0	<u> </u>

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete colum		`		<u>)). </u>
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	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				
	the U S See Part IV, line 22	114,844	114,844		
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				
6	Compensation not included above, to disqualified		İ	ŀ	
	persons (as defined under section 4958(f)(1)) and		İ		
	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				
ь	Legal			,	
С	Accounting				
d	Lobbying			-	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees			· · · · · · · · · · · · · · · · · · ·	
g g	Other				
12	Advertising and promotion				
13	Office expenses	8,011		8,011	
14	Information technology	234		234	
15	Royalties	233			
16	Occupancy				
	· · ·				
17	Travel				
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19			·-	-	
20	Interest				
21	· · · · · · · · · · · · · · · · · · ·			···	
22	Depreciation, depletion, and amortization		· · · · · · · · · · · · · · · · · · ·		
23 24					,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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)		<u> </u>		***************************************
a					
Ь					
r C					
d					
e	All officers	·- · · · · · · · · · · · · · · · · · ·			
f	All other expenses	100.000	114 044	0.245	0
25 26	Total functional expenses. Add lines 1 through 24f	123,089	114,844	8,245	
2 0	Joint Costs. Check here ► ☐ if following \ SOP 98-2. Complete this line only if the organization				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				

rar	<u> </u>	Dalatice Stieet					
		•	(A)		(E	-	
	1	Cash - non-interest-bearing	Beginning of year	1	End of		
		Ť	(4,469)	2		(8,2	45)
	2	Savings and temporary cash investments		3			
	4			4			
	5	Accounts receivable, net		-			
	3	Receivables from current and former officers, directors, trustees, key		5			
	6	employees, or other related parties. Complete Part II of Schedule L					
	•	Receivables from other disqualified persons (as defined under section		ŧ			
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete		6			
A	,	Part If of Schedule L		7			
s s	7			8			
e	8	Inventories for sale or use		9 -			
t	9	Prepaid expenses and deferred charges		3			
S	10a	Land, buildings, and equipment: cost basis 10a		i i			
	ь	Less accumulated depreciation Complete		100			
		Part VI of Schedule D		10c			
	11	Investments - publicly traded securities		12			
	12	Investments - other securities See Part IV, line 11		13			
	13	Investments - program-related See Part IV, line 11		14			—
	14	Intangible assets		15			—
	15	Other assets See Part IV, line 11	(4.460)	16		/0 2	4 E \
	16	Total assets. Add lines 1 through 15 (must equal line 34)	(4,469)	17		(8,2	43)
	17	Accounts payable and accrued expenses		18			
	18	Deferred revenue	-	19			
i	19			20			
a b i	20	Tax-exempt bond liabilities		21			
	21	Escrow account liability. Complete Part IV of Schedule D					
į	22	Payables to current and former officers, directors, trustees, key					
i t		employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22			
ì	22	Secured mortgages and notes payable to unrelated third parties		23			
e	23 24	Unsecured notes and loans payable		24			
S	25	Other liabilities Complete Part X of Schedule D		25			
	26	Total liabilities. Add lines 17 through 25	0	26		•	0
	20	Organizations that follow SFAS 117, check here ▶ ☒ and					<u>-</u>
		complete lines 27 through 29, and lines 33 and 34.					
N F e u	27	Unrestricted net assets	(4,469)	27		(8,2	(45)
t n	28	Temporarily restricted net assets	(1,103)	28		(0)	
A d	29	Permanently restricted net assets		29			
s B		Organizations that do not follow SFAS 117, check here ▶ □			•••••		
s a e l		and complete lines 30 through 34.		-			
t a	30	Capital stock or trust principal, or current funds		30			
s n	31	Paid-in or capital surplus, or land, building, or equipment fund	****	31			
o e	32	Retained earnings, endowment, accumulated income, or other funds		32			
r s	33	Total net assets or fund balances	(4,469)	33		(8,2	245)
	34	Total liabilities and net assets/fund balances	(4,469)	34		_	245)
Par	t XI	Financial Statements and Reporting		I I			
	1					Yes	No
1	Accou	nting method used to prepare the Form 990 🛛 Cash 🔲 Accrual 🔲 Oth	er				
2a		he organization's financial statements compiled or reviewed by an independent accounta	nt?		. 2a	<u> </u>	X
ь					. 2b		Х
С		" to lines 2a or 2b, does the organization have a committee that assumes responsibility fo	or oversight of				
		dit, review, or compilation of its financial statements and selection of an independent acco			. 2c		
3a		esult of a federal award, was the organization required to undergo an audit or audits as se					
		ngle Audit Act and OMB Circular A-133?					X
_ь		," did the organization undergo the required audit or audits?			. 3b		
		EEA			Form	1 990 (2	2008)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

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

2008

Open to Public Inspection

Employer identification number

		COMPASSIONS N								104353			
Pa	rt I	Reason for	Public Charity	y Status (All organiza	ations mus	complete	this part.) ((see instru	ictions)				
he	orgar	nization is not a privati	e foundation becau	se it is [.] (Please check or	nly one org	anization)						
1		A church, convention	of churches, or as	sociation of churches de	escribed in	section 1	70(b)(1)(A)	(i).					
2		A school described in	n section 170(b)(1)(A)(ii). (Attach Schedule	∍E)								
3		A hospital or a coope	erative hospital serv	rice organization describ	ed ın secti	on 170(b)	(1)(A)(iii). (Attach Sc	hedule H)				
4		A medical research of	organization operati	ed in conjunction with a h	nospital de	scribed in	section 17	0(Ь)(1)(А)	(iii). Enter	the hospita	al's name	∋,	
		city, and state							<u> </u>				
5				of a college or university	owned or	operated l	by a goverr	nmental ur	nt describe	d in			
		section 170(b)(1)(A))(iv). (Complete Pa	rt II)									
6		A federal, state, or lo	cal government or	governmental unit descri	bed in sec	tion 170(t)(1)(A)(v).						
7		An organization that	normally receives a	a substantial part of its su	apport from	a governi	mental unit	or from the	e general p	oublic			
		described in section	170(b)(1)(A)(vi). (Complete Part II)									
8		•		170(b)(1)(A)(vi). (Comp		-							
9	X	An organization that	normally receives	(1) more than 33 1/3% o	f its suppoi	t from con	itributions, i	membersh	ııp fees, an	d gross			
		receipts from activities	es related to its exe	mpt functions - subject to	o certain e	cceptions,	and (2) no	more than	33 1/3% 0	of its			
				and unrelated business to				tax) from	businesse	s			
	_			30, 1975. See section 5	-	-							
0		•	•	dexclusively to test for p	-			-		s)			
1		•	•	d exclusively for the bene	•				-				
				rted organizations descr						ection			
			p-100)	the type of supporting o	-				- 1	m			
		a TypeI	b ∐ Type	_			lly integrate		d	∐ lype∣	III-Other		
е	Ш			rganization is not control									
		=		s and other than one or r	nore public	ly support	ted organiza	ations des	cribea in s	ection			
		509(a)(1) or section				T 1 T.		111					
t		-		termination from the IRS					orting				
		organization, check t											· · ⊔
9		=	06, nas the organiz	ation accepted any gift o	ir Continbut	on nom ar	ly or the						
		following persons?	linasti, ar indirasti,	controls, either alone or	togothor w	ith parcon	a docombos	tup (u)				Yes	No
		•		of the supported organia							11g(i)	165	140
				ribed in (i) above?							11g(ii)		
				n described in (i) or (ii) al							11g(iii)		
h				the organizations the org							119()	<u> </u>	
		T	T				1 43 54		(vi) I	s the	A.50	Amount	
	(i) Na	arne of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9	(iv) Is the o	-	(v) Did yo		organizat	tion in col		Amount upport	O1
		•		above or IRC section	governing		(i) of your	support?	(i) organize	d in the S?			
			1	(see instructions)	Yes	No	Yes	No	Yes	No	j		
					1						ļ		
											<u> </u>	_	
								1					
			_		 	<u> </u>	-						
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			<u> </u>		ļ	ļ	 	<u> </u>	ļ	ļ	-		
Tot					1		1		1				

Schedule A (Form 990 or 990-EZ) 2008 GLOBAL COMPASSIONS MINISTRIES 26-1104353 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on The value of services or facilities furnished by a governmental unit to the 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) Public support. Subtract line 5 from line 4 Section B. Total Support (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Calendar year (or fiscal year beginning in) Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is 10 Other income Do not include gain or loss from the sale of capital assets 11 Total support. Add lines 7 through 10 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) organization. Section C. Computation of Public Support Percentage Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 % Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 15 % 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

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

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18

Part III Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you checked the box on I	ine 9 of Part I)					
Sec	tion A. Public Support						
Cale	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	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						
3	Gross receipts from activities that are not an unrelated trade or business under section 513 .						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					<u></u>	
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5					-	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons			:			
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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						0
Sec	tion B. Total Support						
Çale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6					·	
10a	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						
с 11	Add lines 10a and 10b						
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)			<u> </u>	<u> </u>	1	
14	First five years. If the Form 990 is for the organiza check this box and stop here			or fifth tax year as	a section 501(c)	(3) organizatio	n, ▶ <u>□</u>
	tion C. Computation of Public Support				_ _	, , ,	
15	Public support percentage for 2008 (line 8, column					15	0.00 %
16	Public support percentage from 2007 Schedule A, F			• • • • • • •		16	
	tion D. Computation of Investment Inc			(0)		-	0.00 %
17	Investment income percentage for 2008 (line 10c, c					17	0.00 %
18	Investment income percentage from 2007 Schedule					18	%
19a	33 1/3% support tests - 2008. If the organization					and line 17 is	
	not more than 33 1/3%, check this box and stop he					00.4/00/ ====1	► L_
b	33 1/3% support tests - 2007. If the organization						
20	is not more than 33 1/3%, check this box and stop						▶ 🔯
20	Private Foundation: If the organization did not che	CK a DOX ON line	14, 19a, or 19b,	check this dox a	iu see instruction	ю	

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

➤ Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV,

OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service Name of the organization

lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Open to Public Inspection

and drive digaments		_				dendication number
LOBAL COMPASSIONS M	INISTRIES	<u> </u>			26-	1104353
Part I Fundraising Activitie	es. Complete if th	e organization	answered	"Yes" to Form 990, P	art IV, line 17.	
1 Indicate whether the organization ra	sed funds through	h any of the fo	llowing act	ivities Check all that a	apply	
a Mail solicitations				of non-government g		
b Email solicitations				of government grants		
c Phone solicitations				ndraising events		
d In-person solicitations		3 —		3 - 1		
2a Did the organization have a written of	or oral agreement	with any indivi	idual (inclu	ding officers, directors	trustees	
or key employees listed in Form 990						Yes No
b If "Yes," list the ten highest paid indi		-		-	_	163 🔲 110
to be compensated at least \$5,000 t						
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundra		(iv) Gross receipts from activity	(v) Amount paid to (or retained by)	(vi) Amount paid to (or retained by)
or only (undusor)		contribut		nom activity	fundraiser listed in	organization
-		Yes	No		55. (7)	-
					-	
				· · · · · · · · · · · · · · · · · · ·		
						•
						
			L		ļ <u></u>	
T						
Total					<u> </u>	J
3 List all states in which the organization	on is registered or	licensed to so	licit funds	or has been notified it	is exempt from	
registration or licensing						
						
			<u>.</u>			
						
•						
						
			-			

			BAL COMPASSIONS N			-1104353 Page 2
Pa	rt II	_ _				i d
Re	,	more than \$15,000 on Form 99	(a) Event #1 GCM (event type)	(b) Event #2 NARANJAL (event type)	(c) Other Events (total number)	(d) Total Events Add col (a) through col (c))
e n u e	1 2 3	Gross receipts	92,916	12,739	9,288	114,943
D r e	4	Cash prizes				(133)
c t	5	Non-cash prizes				
E X	6	Rent/facility costs				
p e n	7	Other direct expenses				
s e s Pa	8 9 rt 1	Direct expenses summary Add line Net income summary Combine line Gaming. Complete if the or than \$15,000 on Form 990-EZ	es 3 and 8 in column (d) ganization answered "Yes"		>	(114,943)
Rø>ec:			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
u e	1	Gross revenue				
D_r@0+	2	Cash prizes				
	3	Non-cash prizes				
шхо о сив	4	Rent/facility costs				
s	5	Other direct expenses	Yes %	Yes %	☐ Yes %	
	6	Volunteer labor	□ No	□ No	□ No	
	7	Direct expense summary Add lines	s 2 through 5 in column (d)			()
	8	Net gaming income summary Com	bine lines 1 and 7 in colum	n (d)		
9 a b	l Is	nter the state(s) in which the organiza the organization licensed to operate (No," Explain				Yes No
		ere any of the organization's gaming 'Yes," Explain	licenses revoked, suspend	ed or terminated during the	tax year?	10a
11		pes the organization operate gaming			· · · · · · · · · · · · · · · · · · ·	
12		the organization a grantor, beneficiar med to administer charitable gaming		nember of a partnership or C	<u> </u>	12

SCHEDULE I		Gra	Grants and Other Assistance to Organizations,	Assistance to	o Organization	.	OMB	OMB No 1545-0047
(Form 990)			Governments, and Individuals in the U.S.	and Individu	als in the U.S.		-	2008
Department of the Treasury Internal Revenue Service	•	Complete if th	 Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990. 	answered "Yes," on Form ► Attach to Form 990.	990, Part IV, lines 21	or 22.	đ	Open to Public Inspection
Name of the organization GLOBAL COMPASSIONS MINISTRIES	INISTRIES						Employer identification number 26-1104353	иттрет ,
Part I General Information on Grants and Assistance	nation on Grants	and Assistar	nce					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ntain records to substa	ntiate the amoun	it of the grants or assist	ance, the grantees' eli	gibility for the grants or	assistance, and		
the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of	to award the grants or a	assistance? . for monitoring th		grant funds in the United States.				. A res
==	her Assistance to	Governmer	nts and Organizat	ions in the Unit	ed States. Complet	e if the organization answ	vered "Yes" on	
Form 990, Part IV, I.	Form 990, Part IV, line 21 for any recipient that received more than both IV and Schooling Lt (Form 900) if additional enace is needed	that received mo	~	this box if no one reci	pient received more tha	in \$5,000 Use		≥
1 (a) Name and address of organization	zation	(b) EIN	(c) IRC section	(d) Amount of cash orant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	9 5 1
						(leil)		
			:					
					·			
l	77	nment organizati		•	•			
For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990	rk Reduction Act Not	t Notice, see the Instruction	tructions for Form 990	G	EEA		58	Schedule I (Form 990) 2008

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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

(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
HAITI UNDERVELOPED NATION	1,000		107,984		
Part IV Supplemental Information. Complete	Complete this part to provide th	e information required in	the information required in Part I, line 2, and any other additional information	ner additional information	

Schedule I (Form 990) 2008

EEA

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990

➤ 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.

OMB No 1545-0047

2008

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Name of the organization	criployer identification number
GLOBAL COMPASSIONS MINISTRIES	26-1104353
01. Members or stockholder classes and rights (Part VI, line 6)	
ORGANIZATIONS HAS MEMBERS	
On Warbar alaskian for additional markers (Dark W. line Go)	
02. Member election for additional members (Part VI, line 7a)	
NEW MEMBERS MAY JOIN AND THE BOARD DOES HAVE ELECTIONS AT THE END OF I	EACH TERM TO ELECT
NEW OFFICERS AND THE NEW MEMBERS MAY RUN FOR OFFICE. MEMBERS DO NOT I	HAVE TO BE VOTED IN
TO JOIN	
10 0011	
03. Form 990 governing body review (Part VI, line 10)	
NO NEW INFORMATION	
04 Conflict of interest policy compliance (Part VI line 12g)	
04. Conflict of interest policy compliance (Part VI, line 12c)	
THE ORGANIZATION IS IN COMPLIANCE AND DOES HAVE A CONFLICT OF INTERES	T POLICY IN THEIR
ARTICLES OF ORGANIZATION AND BYLAWS THAT WAS ESTABLISHED WHEN THE GROU	UP CAME INTO
EXISTENCE	
21272	
OF GEO 11 11 11 11 11 11 11 11 11 11 11 11 11	
05. CEO, executive director, top management comp (Part VI, line 15a)	
THE ORGANIZATION DOES PAY ANY INDIVIDUAL ALL OFFICERS ARE VOLUNTEERS	
06. Other officer or key employee compensation (Part VI, line 15b	
COT COMOL CILICOL CI NOT CAMPACTOR COMPONDACION (1 11 C 12)	
THE ORGANIZATION HAS NO EMPLOYEES	
07. Governing documents, etc, available to public (Part VI, line 19)	
ALL DOCUMENTS ARE AVAILABLE UPON REQUEST	