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Form **990-EZ**Department of the Treasury  
Internal Revenue Service**Short 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)  
► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.  
► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

**2008****Open to Public  
Inspection**

<b>A</b> For the 2008 calendar year, or tax year beginning <b>Oct 1</b> , 2008, and ending <b>Sept 30</b> , 20 <b>09</b>	
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>Lightworker</b> Number and street (or P O box, if mail is not delivered to street address) Room/suite <b>5351 N Lisa Ln</b> City or town, state or country, and ZIP + 4 <b>Las Vegas NV, 89149-4612</b>
<b>D</b> Employer identification number <b>33 0877206</b>	<b>E</b> Telephone number <b>( 702 ) 871-3317</b>
<b>F</b> Group Exemption Number . . . . .	
<b>G</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual Other (specify) ►	
<b>H</b> Check <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)	
<b>I</b> Website: ► <b>Lightworker.com</b>	
<b>J</b> Organization type (check only one)— <input checked="" type="checkbox"/> 501(c) ( 3 ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
<b>K</b> Check <input type="checkbox"/> if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.	
<b>L</b> Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ► \$ <b>459391.37</b>	

<b>Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances</b> (See the instructions for Part I.)		
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received . . . . .	<b>1</b> <b>2687.39</b>
	<b>2</b> Program service revenue including government fees and contracts . . . . .	<b>2</b> <b>441841.86</b>
	<b>3</b> Membership dues and assessments . . . . .	<b>3</b> <b>0</b>
	<b>4</b> Investment income . . . . .	<b>4</b> <b>0</b>
	<b>5a</b> Gross amount from sale of assets other than inventory . . . . .	<b>5a</b> <b>0</b>
	<b>b</b> Less: cost or other basis and sales expenses . . . . .	<b>5b</b> <b>0</b>
	<b>c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule) . . . . .	<b>5c</b> <b>0</b>
	<b>6</b> Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>	
	<b>a</b> Gross revenue (not including \$ _____ of contributions reported on line 1) . . . . .	<b>6a</b> <b>0</b>
	<b>b</b> Less: direct expenses other than fundraising expenses . . . . .	<b>6b</b> <b>0</b>
	<b>c</b> Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . . .	<b>6c</b> <b>0</b>
	<b>7a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>7a</b> <b>14862.12</b>
	<b>b</b> Less: cost of goods sold . . . . .	<b>7b</b> <b>14030.56</b>
	<b>c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	<b>7c</b> <b>831.56</b>
	<b>8</b> Other revenue (describe ►) . . . . .	<b>8</b> <b>0</b>
	<b>9</b> <b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 . . . . .	<b>9</b> <b>445360.81</b>
	<b>Expenses</b>	<b>10</b> Grants and similar amounts paid (attach schedule) . . . . .
<b>11</b> Benefits paid to or for members . . . . .		<b>11</b> <b>614.57</b>
<b>12</b> Salaries, other compensation, and employee benefits . . . . .		<b>12</b> <b>120645.85</b>
<b>13</b> Professional fees and other payments to independent contractors . . . . .		<b>13</b> <b>128079.33</b>
<b>14</b> Occupancy, rent, utilities, and maintenance . . . . .		<b>14</b> <b>23307.23</b>
<b>15</b> Printing, publications, postage, and shipping . . . . .		<b>15</b> <b>16402.85</b>
<b>16</b> Other expenses (describe ► <b>Auto,BnkChgs,ComputerExp,ISP&amp;Server,Software,Stage We</b> ) . . . . .		<b>16</b> <b>147123.18</b>
<b>17</b> <b>Total expenses.</b> Add lines 10 through 16 . . . . .		<b>17</b> <b>437484.02</b>
<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .		<b>18</b> <b>7876.79</b>
<b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .		<b>19</b> <b>28434.00</b>
<b>20</b> Other changes in net assets or fund balances (attach explanation) . . . . .		<b>20</b> <b>47728.27</b>
<b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20 . . . . .		<b>21</b> <b>84039.06</b>

<b>Part II Balance Sheets.</b> If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.)		
	(A) Beginning of year	(B) End of year
<b>22</b> Cash, savings, and investments . . . . .	<b>-2221.00</b>	<b>22 59174.59</b>
<b>23</b> Land and buildings . . . . .	<b>27353.00</b>	<b>23 20137.62</b>
<b>24</b> Other assets (describe ► <b>Computers and AV Equ</b> ) . . . . .	<b>31552.00</b>	<b>24 31552.44</b>
<b>25</b> <b>Total assets</b> . . . . .	<b>56684.00</b>	<b>25 110864.65</b>
<b>26</b> <b>Total liabilities</b> (describe ► <b>Credit Card debt, loan payable</b> ) . . . . .	<b>28250.00</b>	<b>26 34702.38</b>
<b>27</b> <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21) . . . . .	<b>28434.00</b>	<b>27 76162.27</b>

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

Cat No 106421

Form **990-EZ** (2008)

## Expenses

(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)

28	<b>PATH TO EMPOWERMENT SEMINARS:</b> <b>SEMINARS AND TRAININGS WERE PRESENTED GLOBALLY 19 TIMES DURING FISCAL 2008.</b> Total attendees for fiscal year 2008 were 2550. (Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	151452.76
29	<b>MONTHLY INTERNET BROADCASTS OFFERS TEACHINGS FOR SPIRITUALLY EMPOWERED LIVING</b> <b>THE VIRTUALLIGHT BROADCAST is offered each month free of charge on the internet. Each month</b> <b>we present a three hour show that reaches between 20000 to 30000 viewers each broadcast.</b> (Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	36941.71
30	<b>WEB SITE LIGHTWORKER.COM SERVES THOUSANDS EACH MONTH. Lightworker.com is a free me</b> <b>web site for people to find the empowering messages from the group each month. There are many in</b> <b>areas for people to explore and connect. The site serves more than 35,000 unique visitors per month</b> (Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	30444.36
31	Other program services (attach schedule) <input type="checkbox"/> (Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	14030.56
32	<b>Total program service expenses</b> (add lines 28a through 31a) <input type="checkbox"/>	32	232869.39

[illegible]

**Part V Other Information** (Note the statement requirements in the instructions for Part VI.)

	Yes	No
<b>33</b> Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .	<b>33</b>	✓
<b>34</b> Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes . . . . .	<b>34</b>	✓
<b>35</b> If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
<b>a</b> Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements? . . . . .	<b>35a</b>	✓
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>35b</b>	✓
<b>36</b> Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N . . . . .	<b>36</b>	✓
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ <b>37a</b> . . . . .		
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	<b>37b</b>	✓
<b>38a</b> Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return? . . . . .	<b>38a</b>	✓
<b>b</b> If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	<b>38b</b>	8000.00
<b>39</b> Section 501(c)(7) organizations. Enter:		
<b>a</b> Initiation fees and capital contributions included on line 9 . . . . .	<b>39a</b>	
<b>b</b> Gross receipts, included on line 9, for public use of club facilities . . . . .	<b>39b</b>	
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ . . . . . ; section 4912 ▶ . . . . . ; section 4955 ▶ . . . . .		
<b>b</b> Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I . . . . .	<b>40b</b>	✓
<b>c</b> Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ . . . . .		
<b>d</b> Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ . . . . .		
<b>e</b> All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. . . . .	<b>40e</b>	✓
<b>41</b> List the states with which a copy of this return is filed. ▶ <b>California, Nevada</b> . . . . .		
<b>42a</b> The books are in care of ▶ <b>Steve L Rother</b> . . . . . Telephone no. ▶ <b>( 702 ) 871 3318</b>		
Located at ▶ <b>5351 N Lisa Ln Las Vegas NV</b> . . . . . ZIP + 4 ▶ <b>89149</b>		
<b>b</b> 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)? . . . . .	<b>42b</b>	✓
If "Yes," enter the name of the foreign country: ▶ . . . . .		
See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .		
<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . .	<b>42c</b>	✓
If "Yes," enter the name of the foreign country: ▶ . . . . .		
<b>43</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/>		
and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>43</b> . . . . .		
<b>44</b> Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>44</b>	✓
<b>45</b> Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>45</b>	✓

**Part VI Section 501(c)(3) organizations only.** All section 501(c)(3) organizations must answer questions 46–49 and complete the tables for lines 50 and 51.

- |  | Yes        | No                                  |
|--|------------|-------------------------------------|
| <b>46</b> 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 . . . . . | <b>46</b>  | <input checked="" type="checkbox"/> |
| <b>47</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .   | <b>47</b>  | <input checked="" type="checkbox"/> |
| <b>48</b> Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .   | <b>48</b>  | <input checked="" type="checkbox"/> |
| <b>49a</b> Did the organization make any transfers to an exempt non-charitable related organization? . . . . .   | <b>49a</b> | <input checked="" type="checkbox"/> |
| <b>b</b> If "Yes," was the related organization(s) a section 527 organization? . . . . .   | <b>49b</b> | <input checked="" type="checkbox"/> |
- 50** Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$100,000 ▶				

- 51** Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		
Total number of other independent contractors each receiving over \$100,000 . . . ▶		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**

Signature of officer

**Stephen L Rother Pres CEO**

Type or print name and title

Date

1/16/2010

**Paid Preparer's Use Only**

Preparer's signature

Date

Check if self-employed ☐

Preparer's Identifying Number (See instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4

EIN

Phone no ( )

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ☐ Yes ☐ No

**SCHEDULE L**  
**(Form 990 or 990-EZ)**Department of the Treasury  
Internal Revenue Service**Transactions With Interested Persons**

▶ Attach to Form 990 or Form 990-EZ.  
▶ To be completed by organizations that answered  
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,  
or Form 990-EZ, Part V, line 38a or 40b.

OMB No 1545-0047

**2008****Open To Public  
Inspection**

Name of the organization

Lightworker

Employer identification number

33

0877206

**Part I Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only).

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

- 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ \_\_\_\_\_
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons.**

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Stephen L Rother	✓		8000.00	8000.00		✓	✓		✓	
Total				▶ \$						

**Part III Grants or Assistance Benefitting Interested Persons.**

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

**Part IV Business Transactions Involving Interested Persons.**

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No