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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

Open to Public Inspection

Department of the Treas ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service 2009, and ending For the 2009 calendar year, or tax year beginning January 1 December 31 20 09 D Employer identification number C Name of organization James House Check if applicable: Doing Business As 01 0827142 Address change label or print or Number and street (or P.O. box if mail is not delivered to street address) Telephone number Room/suite Name change type. P O Box 1865 (320) 235-0808 Initial return Specific City or town, state or country, and ZIP + 4 ☐ Terminated lostruc tions. Willmar MN 56201-1865 G Gross receipts \$ 37,118 Amended return F Name and address of principal officer: H(a) Is this a group return for affitiates? Ves No Application pending Gary Van Epps, P O Box 1856, Willmar MN 56201 H(b) Are all affiliates included? Yes No) ◄ (insert no.) 4947(a)(1) or Tax-exempt status: 501(c) (If "No," attach a list. (see instructions) Website: ▶ H(c) Group exemption number > Form of organization: ☐ Corporation ☐ Trust ☐ Association ☐ Other ► 501(c)3 L. Year of formation: 2006 M State of legal domicile: MN Part I Summary Briefly describe the organization's mission or most significant activities: James House is a semi-structured residence designed to support recovery using AA principles with Jesus christ as a comerstone. Residents agree to find Governance employment, develope s mentoring relationship, live respectfully with others, attend a min. of one Bible Study per week church attendance and recovery meetings. 2 Check this box ▶ ☐ If the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a). 6 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 0 Total number of employees (Part V, line 2a). . . 6 10 Total number of volunteers (estimate if necessary) 7a 0 7a Total gross unrelated business revenue from Part VIII, column (C), line 12. b Net unrelated business taxable income from Form 990-T, line 34, 0 **Current Year** 25,848 29,708 Contributions and grants (Part VIII, line 1h) 1,520 6,992 Program service revenue (Part VIII, line 2g) . -5,820 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 508 418 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 22.056 37,118 12 Total revenue—add lines 8 through 11 (must equal Rant VIII) column (A), line 12) 0 0 Grants and similar amounts paid (Part IX, column (A), lines (4) 13 Benefits paid to or for members (Fart IX, column (A), line Salaries, other compensation, employee benefits (Part IX, column Professional fundraising fees (Part IX, column (A), line 11e) 919 294 1.819 0 0 0 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part X, column (1975) (1982) [1975] 30,810 29,068 Other expenses (Part IX, column (A), lines 11a-11d, 111-241) 33,548 29,362 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). Revenue less expenses. Subtract line 18 from line 12 7,755 -11,492 Beginning of Current Year **End of Year** 118,004 116,602 Total assets (Part X, line 16) . 150,481 141,322 21 Total liabilities (Part X. line 26) Net assets or fund balances. Subtract line 21 from line 20 -32,477 -24,720 Part II Signature Block 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 Signature of officer Here Director Jose Dh Thimons Type or print name and title Date Check if Prenarer's identifying number Preparer's (see instructions) signature employed ▶ □ Paid Preparer's Firm's name (or yours EIN **Use Only** if self-employed address, and ZiP + 4 Phone no. ▶ ()

Form	990	(2009)	

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Paga	z

Par	Statement of Program Service Accomplishments
1	Briefly describe the organization's mission:
	To provide a Christian Structured, sober environment for recovering chemically dedendent individuals who have been
	discharged from A C D treatment program
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?
	services?
_	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
4	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.
48	(Code:) (Expenses \$ 18,378 including grants of \$ 0) (Revenue \$ 37,118)
	To provide a Christian Structured, sober environment for recovering chemically dedendent individuals who have been
	discharged from A C D treatment program
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4b	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$)
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40	(Code:) (Expenses \$including grants of \$) (Revenue \$)
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	Other program services. (Describe in Schedule O.)
-74	(Expenses \$ including grants of \$ ) (Revenue \$ )
40	Total program service expenses > 14 27R

is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A  1 to the organization required to complete Schedule B. Schedule of Contributions?  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 III.  5 Section 501(c)(6) granizations and organization organization engage in lobbying activities? If "Yes," complete Schedule C, Part III.  5 Section 501(c)(6), 501(c)(6), 50, 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.  6 Did the organization real any donor advised funds or any similar funds or 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 III.  7 Did the organization maintain collections of works of ant, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  8 Did the organization maintain collections of works of ant, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  9 Did the organization maintain collections of works of ant, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  10 Did the organization services? If "Yes," complete Schedule D, Part III.  10 Did the organization services? If "Yes," complete Schedule D, Part V.  11 Is the organization are not an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII.  10 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  10 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X	Par	t IV Checklist of Required Schedules			
2 Is the organization required to complete Schedule B. Schedule of Contributors?.  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 II.  4 Sections 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II.  5 Sections 501(c)(4), 501(c)(3), and 501(c)(6) organizationis is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II.  5 Did the organization and and and endived funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or 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 II.  7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, instortion and areas, or historic structures? If "Yes," complete Schedule D, Part II.  9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II.  10 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II.  11 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II.  11 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II.  12 Did the organization of works of art, historical treasures, or other semants, or quasi-endowments? If "Yes," complete Schedule D, Part II.  13 List the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part II.				Yes	No
2 Is the organization required to complete Schedule B, Schedule of Contributors?, 2 3 Did the organization region idented to indirect political campalign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I .  5 Section S01(c)(3) organizations. Did the organizations engage in lobbying activities? If "Yes," complete Schedule C, Part II .  5 Section S01(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 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II .  1 Did the organization maintain collections of works of art, historical treasures, or other similar asserts? If "Yes," complete Schedule D, Part III .  1 Did the organization maintain collections of works of art, historical treasures, or other similar asserts? If "Yes," complete Schedule D, Part III .  2 Did the organization report an amount in Part X, ine 21; serve as a custodian for amounts not tisted in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV .  10 Did the organization in directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.  10 Did the organization report an amount for investments—credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part VI.  10 Did the organization report an amount for investments—credit repair, or debt negotiation or environments. If "Yes," complete Schedule D, Part VII.  10 Did the organization report an amount for other isasets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII.  10 Did the organization report an amount for other isasets in Part X, line 15 that is 5% or more of its total asset	1		1	1	
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Ordinate Schedule D, Part III.  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.  Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.  It is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII.  Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XII.  Did the organization report an amount for other itabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, III, and XIII.  By the organization as school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States? If "Yes," complete Schedule F, Part II.  Did the organization report on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part II.  Did the organization report a total	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		1
X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.  10 Did the organization directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.  11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable  11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII.  12 Did the organization report an amount for investments—program related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  13 Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.  14 Did the organization report an amount for other isabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.  15 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, IX, and XIII.  16 Did the organization natured in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule F, Part I.  17 Did the organization maintain an office, employees, or agents outside of the United States?  18 The organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization report a total of more than \$15,000 of expenses for professional fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part II.  18 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization report a total of more than \$15,000 of expenses for professional fundraising services on Part	8		8		1
quasi-endowments? If "Yes," complete Schedule D, Part V.  11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.  Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.  Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X VIII.  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.  Did the organization separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X, III and XIII.  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, III and XIII.  Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, III and XIII.  So the organization maintain an office, employees, or agents outside of the United States?  Did the organization report on Part IX, column (A), line 3, more than \$5,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part II.  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of agreate or assistance to any organization report on Part IX, column (A), line 3, more than \$5,000 of agreate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III.  Did the organization report on Part IX, column (A), line 3, mo	9	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	9		1
<ul> <li>VII, VIII, IX, or X as applicable</li> <li>Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII.</li> <li>Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.</li> <li>Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.</li> <li>Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.</li> <li>Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X</li> <li>Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization included in consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part XI, XII, and XIII.</li> <li>12A Was the organization aschool described in section 170(b)t)(A)(ii)? If "Yes," complete Schedule E</li> <li>Is the organization aschool described in section 170(b)t)(A)(ii)? If "Yes," complete Schedule E</li> <li>Did the organization maintain an office, employees, or agents outside of the United States?</li> <li>b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gagregate grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.</li> <li>Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gagregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part II.</li> <li>Did the organization report at total of more than \$15,000 of expenses for professional fundraising</li></ul>	10		10		1
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13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12A	Was the organization included in consolidated, independent audited financial statements for the tax year?			
Did the organization maintain an office, employees, or agents outside of the United States?  14a	13		13		
business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14a		14a		✓
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.  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.  17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I.  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	b		14b		1
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	15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	15		✓
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	16		1
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	17		1
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III.	18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			1
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			1
	20_				7

Pai	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
<b>24</b> 8	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 lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<b>✓</b>
	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		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<b>/</b>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? 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		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule $M$	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		1
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		1
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		1
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		1
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		1
38 	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38		1

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
		]	Yes	No
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	,	ì	ı
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	ŀ		;
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1c	.	l 
	gaming (gambling) winnings to prize winners?	16.		ļ
	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  1 2a 0	2b	.	: )
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			<b> </b>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	1		
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<u>3b</u>		ļ
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)?	<b>4</b> a		1
b	If "Yes," 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		1
b	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 line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	5c		1
8-	Prohibited Tax Shelter Transaction?	6a		1
	organization solicit any contributions that were not tax deductible?			
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<u>6b</u>		
	Organizations that may receive deductible contributions under section 170(c).		i	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		1
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	many at the second seco	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<b>\</b>
Q	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g		
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	Ĭ	1	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.	ì	1	i .
a	Did the organization make any taxable distributions under section 4966?	9a		1
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>		1
10	Section 501(c)(7) organizations. Enter:	,		
	Initiation fees and capital contributions included on Part VIII, line 12	h	"	1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter:	il	i,	•
	Gross income from members or shareholders	li J	ł	
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	¥	ì	۰.
12a b		12a		<b>✓</b>

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management		<del></del>	T
	1.1	ू इन्हरू	Yes	Mo
1a	Enter the number of voting members of the governing body	6		
b	Enter the number of voting members that are independent	-6		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship w	ith 選挙		
	any other officer, director, trustee, or key employee?	2	- <del> </del>	1
3	Did the organization delegate control over management duties customarily performed by or under the dire		1	١.
	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	1? 4	<b>_</b>	1
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<b> </b> ✓
6	Does the organization have members or stockholders?	6	<del> </del>	1
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	ers		1.
	of the governing body?	. 7a	Ц	1
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? .	. 7b	)	
8	Did the organization contemporaneously document the meetings held or written actions undertaken duri	ng 🔯		
	the year by the following:	<b>1999</b>	24.2	
a	The governing body?	. 82	1	
b	Each committee with authority to act on behalf of the governing body?	. 8b	4	1
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach	ed		1
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	. <b>9</b> a		1
Sec	tion B. Policies (This Section B requests information about policies not required by the	Interna	ď	
Rev	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10:	1	<b>✓</b>
	If "Yes," does the organization have written policies and procedures governing the activities of such chapte	rs,	1	
	affiliates, and branches to ensure their operations are consistent with those of the organization?	101	<u> </u>	<b></b>
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing	the	1	1
	form?	. 11	1	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		10.7	2
	Does the organization have a written conflict of interest policy? If "No," go to line 13	124	3 1	<u> </u>
	Are officers, directors or trustees, and key employees required to disclose annually interests that could gi	ive	1	}
	rise to conflicts?	121	o ✓	L
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes	ا م		
·	describe in Schedule O how this is done	120		✓
13	Does the organization have a written whistleblower policy?	13		1
14	Does the organization have a written document retention and destruction policy?	14		1
15	Did the process for determining compensation of the following persons include a review and approval	by 🔯	4.4	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		100	
а	The organization's CEO, Executive Director, or top management official	15:		1
b	Other officers or key employees of the organization	151	<b>o</b>	1
_	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
169	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	ent 🐺		
	with a taxable entity during the year?	160	3	1
	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	ata 🔯		P.Ag
b	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safegua		<b>*</b> * * * * * * * * * * * * * * * * * *	
	the organization's exempt status with respect to such arrangements?	161		1
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ MN			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (5	01(c)(3)	onka	
	available for public inspection, Indicate how you make these available. Check all that apply.	~ · (~)~	- <del> </del>	
46	☐ Own website ☐ Another's website ☑ Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, confidence in Schedule O whether (and if so, how), the organization makes its governing documents, confidence in Schedule O whether (and if so, how), the organization makes its governing documents, confidence in Schedule O whether (and if so, how), the organization makes its governing documents, confidence in Schedule O whether (and if so, how), the organization makes its governing documents.	Alice of in	toroet	
19		por UI III	ı,cı col	
20	policy, and financial statements available to the public.	nan-a-da	of the	
20	State the name, physical address, and telephone number of the person who possesses the books and organization:   Joseph Thimons, P O Box 1865, Willmar MN 56201	COUNTRY	JI 1116	
	Uldurandi. E accept imments : a par 1440 ' stimus mis again			

# 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. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- 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	mpensate	any o	TILK	_		cer, d	irec			
W	(BS)	1		•	C)			<b>(D</b> )	(E)	<b>(F)</b>
Name and Title	Average		on (		k adl	that ap		Reportable	Reportable compensation	Estimated amount of
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Joseph Thimons Diecttor	40	1								
Gary Van Eps	40						1			
Tom Sweazy Board Member	2	1								
Rod Rice Vice Pres.	2			/						
Gerry Gimse Board Member	2	1								
Jeff Allander Board Member	2	1								
Jeremy Evans Treasury Sec.	2	1		/						

Pa	t VII Section A. Officers, Directors, Tru	istees, Key	Emp	loy	ees,	an	d High	hesi	Compensate	d Employe	983 (00	ntinued)	
	(A)	(18)			•	<b>5</b> 7			<b>(D</b> )	(E)		(F	
	Name and title	Average hours per week	Individual trustee or director	institutional trustee	Officer	a Key employee	R Highest compensated mployee	es Former	Reportable compensation from the organization (W-2/1099-MISC)	Reports compens from reli organizat (W-2/1099-	ation ated bions	Estim amou oth compen from organia and re organia	nt of er sation the ration lated
													-
										-			•
		·											
						-							
										<del></del>			
						-				<del></del>			
						-							
									·			<u> </u>	
<u></u>	Y-4-1		L	L	L	L	<u> </u>						
2	Total number of individuals (including but reportable compensation from the organiza		to the	ose	liste	ed a		• wh	o received mo	ore than \$	100,00		s No
3	Did the organization list any former office employee on line 1a? If "Yes," complete So							yee	, or highest c	ompensat	ed .	3	
4	For any individual listed on line 1a, is the s the organization and related organizations individual.											4	1
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue /es," comp	comp dete S	sens Schi	atio edu	onf Je <i>J</i>	rom a	any uch	unrelated orga	anization 1	for	5	
Se	ction B. Independent Contractors	<del>-</del>		-									
1	Complete this table for your five highest compensation from the organization.	mpensate	d ind	epe	nde	nt c	contrac	ctor	s that received	i more tha	an \$10	0,000 of	
	(A) Name and business add	ress							(B) Description of se	ervices		(C) Compensati	on
_													
2	Total number of independent contractors (in more than \$100,000 in compensation from					to t	hose	liste	d above) who	received			

Pari	VIII	Statement of Revenu	ue	·				
					(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		Federated campaigns .						
g Š	ı	Membership dues		4.500				
a, E		Fundraising events		1,588				
₽.5		Related organizations .					!	
흥등		Government grants (contributio		· · · · · · · · · · · · · · · · · · ·				
要を	f	All other contributions, gifts, grants,		20 420				
불등		and similar amounts not included a		28,120				
SE		Noncash contributions included in life  Total. Add lines 1a-1f			29,708	•		
	<del>- ''</del>	TOTAL ACCINITES 14-11		Business Code	23,700			
2		Services rendered			6,992	6,992		
<u>\$</u>	2a				0,002	0,552		
8	b							
Ž	ء ا					·		
Š	٦							
Program Service Revenue	f	All other program service re	venue .					··
2	q	Total. Add lines 2a-2f		🕨	6,992	· · · · · · · · · · · · · · · · · · ·		
	3 4 5	Investment income (includin other similar amounts) Income from investment of tax-Royalties	exempt bone	▶ . d proceeds ▶				
			Real	(ii) Personal				
	62	Gross Rents						
		Less: rental expenses						
		Rental income or (loss)						
	d	Net rental income or (loss)		▶				
	72	Gross amount from sales of (1)	Securities	(ii) Other				
	′ "	assets other than inventory						
	b	Less: cost or other basis and sales expenses .						
	c d	Gain or (loss)						
venue	8a	events (not including \$	ndraising			-		
Other Rev		of contributions reported on See Part IV, line 18	· · · a					
Othe	b	Less: direct expenses . Net income or (loss) from fu	<b>b</b> Indraising e	vents ▶		:		
	9a	Gross income from gaming a See Part IV, line 19	activities.					
	b	Less: direct expenses Net income or (loss) from g	<b>b</b>					
		Gross sales of inventor returns and allowances .	а					
		Less: cost of goods sold						
	<del>  </del>	Net income or (loss) from sale Miscellaneous Revenue	CO UI IIIVENII	Business Code				<del> </del>
	44-	Nice myonyo		200.633 0000	418	418		
				<del> </del>	410	410		
	b			<del></del>				
	C	All other revenue						
		All other revenue Total. Add lines 11a-11d			418			
		Total revenue. See instruct		<u>: : : :                              </u>	37,118	7,410	0	0

# Part IX Statement of Functional Expenses

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

	All other organizations must complete colu	<del></del>	required to comp	olete columns (B), (	C), and (D).
<i>Do 7b</i>	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			<del></del>
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	294	294		
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
	Management				
	Legal	765		765	
C	Accounting	765		765	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	2,126		2,126	
14	Information technology				
15	Royalties				
16	Occupancy	4,460	4,460		
17	Travel	190	190		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest	12,189	8,167	4,022	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,153	3,453	1,700	
23	Insurance	2,708	1,814	894	
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.)				
_	Non-professional fund raising exp	1,075			1,075
a		105		105	1,010
b	Bank Charges Storage/Fauin	131		131	<del></del>
C	Storage/Equip	166		166	
đ	Misc	100		100	
е					
25 25	All other expenses Total functional expenses. Add lines 1 through 24f	29,362	18,378	9,909	1,075
26	Joint costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

	Balance Sheet	(A)	[" I	(B)
		Beginning of year		End of year
1	Cash-non-interest-bearing		1	
2	Savings and temporary cash investments	3,536	2	7,137
3	Pledges and grants receivable, net		3	<u>.                                    </u>
4	Accounts receivable, net	250	4	401
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II of			
	Schedule L	v=	5	
6	Receivables from other disqualified persons (as defined under section			
1	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete		_	
1	Part II of Schedule L		6	
7	Notes and loans receivable, net		7	<del></del>
8	Inventories for sale or use		8	
7 8 9	Prepaid expenses and deferred charges	<u> </u>	9	····
10a	Land, buildings, and equipment: cost or 10a 129,256			
1	other basis. Complete Part VI of Schedule D			
Ь	Less: accumulated depreciation 10b 20,308	114,101	10c	108,948
11	Investments—publicly traded securities		11	
12	Investments—other securities. See Part IV, line 11	117	12	117
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)	118,004	16	116,602
17	Accounts payable and accrued expenses	2,799	17	597
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Payables to current and former officers, directors, trustees, key			
21 22	employees, highest compensated employees, and disqualified			
1	persons. Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities. Complete Part X of Schedule D	147,682	25	140,725
26	Total liabilities. Add lines 17 through 25	150,481	26	141,322
	Organizations that follow SFAS 117, check here ▶ ☐ and			
27 28 29	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	-32,477	27	-24,720
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ▶ □			
1	and complete lines 30 through 34.			
1	Capital stock or trust principal, or current funds		30	
30				
30 31	•	į	31	
30 31 32	Paid-in or capital surplus, or land, building, or equipment fund			
30	•	-32,477	32 33	-24,720

Pana	12

Pai	at XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990:   Cash  Accrual  Other			•
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			1
	Schedule O.		i [	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		<b>✓</b>
b	Were the organization's financial statements audited by an independent accountant?	<b>2</b> b		✓
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	l		İ
·	the audit, review, or compilation of its financial statements and selection of an independent accountant?	_2c_	L	ļ,
	If the organization changed either its oversight process or selection process during the tax year, explain in		• ;	1
	Schedule O.	}	* ·	i
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		:	ĺ
	issued on a consolidated basis, separate basis, or both:	!	1	,
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	1	,	
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	1		
	the Single Audit Act and OMB Circular A-133?	3a	Į.	1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Form **990** (2009)

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

## **Public Charity Status and Public Support**

Complete If the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Inspection Internal Revenue Service Employer identification number Name of the organization 0827142 James House Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). 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: 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.) 6 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 🛮 An organization that normally receives: (1) more than 33% % 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 331/3 % 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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. c Type II-Functionally integrated b ☐ Type II e 🔲 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 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? No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g() and (iii) below, the governing body of the supported organization? 11g(iii) (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(间) Provide the following information about the supported organization(s). (vi) Is the 66) EN (iii) Type of organization (N) Is the organization (v) Did you notify (vii) Amount of (i) Name of supported organization (described on lines 1-9 in col. (i) listed in your the organization in organization in col. support (i) organized in the above or IRC section governing document? col. (i) of your U.S.? (see instructions)) support? Yes No No Yes

**Total** 

ces or facilities mental unit to the narge						170(b)(1	(f) Total
port  ar beginning in)   ans, and and. (Do not ants.")  the organization's o or expended on  ces or facilities mental unit to the harge		<del>,</del>			(e	) 2009	(f) Total
ons, and yed. (Do not ants.")  the organization's or expended on the organization's or expended on the organization's organiza	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e	) 2009	(f) Total
red. (Do not ants.")  the organization's or expended on ces or facilities mental unit to the narge						<del></del>	
to or expended on the common c			<u> </u> 				i
nental unit to the narge			<u> </u>				
ough 3		<u> </u>			<u> </u>		
vernmental unit or unization) included 2% of the amount on (f)				1100-11		SUBJUT WEEK, JAN 14	
<del></del>	<u></u>	<u> </u>			11		l
	(a) 2005	(b) 2006	(c) 2007	(d) 2008	10	1 2000	(f) Total
	(a) 2000	(6) 2000	(6) 2007	(4) 2000	- 10	1 2003	(i) TOLES
terest, dividends, securities loans,							
						···	
of capital assets							
s 7 through 10 .	<u> </u>	L	l			····	<u> </u>
						L	
is box and stop he	ne	<u>, , ,</u>		-		s a section	on 501(c)(3)
			<del> </del>		·		
tage for 2009 (line	6, column (f) di	ivided by line 1	1, column (f))			<u> </u>	<u>%</u>
_						l	<u>%</u>
-				line 14 is 33% 9	% ог г	nore, che	
and stop here. The organization qualifies as a publicly supported organization						▶ L	
				and line 15 is	331/4 9/	or more	, check this
•	-	• . •	_		40:		<b>&gt;</b> □
zation meets the "f	acts-and-circui	mstances" test,	check this box	and stop here.	Expla	in Part	IV how the
zation meets the "I "facts-and-circumsta	facts-and-circum ances" test. The	nstances" test, o organization qua	check this box a alifies as a public	and <b>stop here.</b> By supported or	Expla ganıza	in in Partition	IV how the ▶ □
	tributions by each evernmental unit or arization) included 2% of the amount on (f).  It line 5 from line 4.  Ort  ar beginning in)   terest, dividends, securities loans, some from similar related business of the business is to the business is to the business is 7 through 10 elated activities, etc. Form 990 is for is box and stop he on of Public Subtage from 2008 Sc. 2009. If the organiganization qualifies 12008. If the organiganization qualifies 12008. If the organiganization qualifies 12008. If the organiganization qualifies 12008 are organization qualifies 12008. If the organiganization qualifies 12008 are organization meets the "facts-and-circumstation meets the "facts-and-circumstation meets the "facts-and-circumstation meets the "facts-and-circumstation organization org	related business of the business is 7 through 10  It include gain or of capital assets of the organization of Public Support Percentage for 2009 (line 6, column (f) dage from 2008 Schedule A, Part 2009. If the organization did not organization qualifies as a publicly are organization qualifies as a publicly of facts-and-circumstances" test. The organization meets the "facts-and-circumstances" test. The organization meets the "facts-and-circumstances" test. The	mental unit to the harge	ces or facilities mental unit to the harge	to or expended on the control of the	to or expended on the part of	to or expended on the parage to parage

Sched	tule A (Form 990 or 990-EZ) 2009						Page 3
Par	Support Schedule for Orga (Complete only if you check				)(2)		
Sec	tion A. Public Support	ca the box o	11 11110 0 01 1 0				
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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				, -···		
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						<del></del>
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						···
ь	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						·
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support	·					
Ca	ilendar year (or fiscal year beginning in) >	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	Amounts from line 6		47,293	84,972	23,967	37,118	193,420
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b		ļ				<del>_</del>
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.)		47,293	84,972	23,967	37,118	193,420
14	First five years. If the Form 990 is for organization, check this box and stop	here	<u> </u>	nd, third, fourth			
Sec	tion C. Computation of Public Su				·		
15 16	Public support percentage for 2009 (line Public support percentage from 2008)					16	<u>%</u> %

Codon of Companion of Lasio orbital in a commission		
5 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	. 15	%
6 Public support percentage from 2008 Schedule A, Part III, line 15	. 16	%
Section D. Computation of Investment Income Percentage		
7 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)	)) 17	%
8 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%
b introduction income percentage from above concession, in the contract of the		

331/2 % support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 331/2 %, and line	_
17 is not more than 33½ %, check this box and stop here. The organization qualifies as a publicly supported organization ▶	<u> </u>

331/4 % support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/4 %, and line 18 is not more than 331/4 %, check this box and stop here. The organization qualifies as a publicly supported organization

Schedule A (F	(Form 990 or 990-EZ) 2009	Page 4
Part IV		Part II, line 10; e instructions.
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
		~~~~~~~~~
**********		
		***************************************

#### SCHEDULE D (Form 990)

### **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

Department of the Treasury Internet Revenue Service

▶ Attach to Form 990. ▶ See separate instructions.

Inspection

OMB No. 1545-0047

Employer identification number Name of the organization 01 0827142 James House Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a Total number of conservation easements . . . . . 2ъ 2c Number of conservation easements on a certified historic structure included in (a) . Number of conservation easements included in (c) acquired after 8/17/06 . . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ..... Number of states where property subject to conservation easement is located ▶ ...... Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: Revenues included in Form 990, Part VIII, line 1 

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Page	2

Par	Organizations Maintain	ing Collections	of Art, H	istoric	al Treasures,	or O	ther Similar As	sets (co	ntinued)
3	Using the organization's acquisition collection items (check all that appli	, accession, and							
a	Public exhibition		đ		Loan or exchan	ge pr	rograms		
b	Scholarty research		0		Other				
C	Preservation for future generations								
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.								
5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?								
Pai	art IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.								
							other assets not	Yes	l No
b	If "Yes," explain the arrangement in	Part XIV and cor	nplete the	o followi	ng table:	r	T		
						-	An	nount	·····
C	Beginning balance					1c	<del> </del>		
d	Additions during the year					1d			
0	Distributions during the year					10 1f	<del> </del>		· · · · · · · · · · · · · · · · · · ·
f	Ending balance			 E 010	· · · · -		<del></del>	Yes	No
b	Did the organization include an arm if "Yes," explain the arrangement in t V Endowment Funds. Co	Part XIV.				For	m 000 Part IV		<del></del>
r al	Endownent Funds. Co	(a) Current year		oryeer			(d) Three years back		
		(a) Caron year	429112	<del>и усы</del>	107.40 7020 0		(b) III co you south	10,100,	
18	Beginning of year balance		<del>                                     </del>			- +			
C	Contributions				- CROS. PL. 10 FRANCE	: • c <b>-</b>			an amerikan s
d	Grants or scholarships		1				**************************************	The Con-	******************
	Other expenditures for facilities					_ [			
	and programs					_			
g	Administrative expenses End of year balance								
2	Provide the estimated percentage of	•		das:					
a	Board designated or quasi-endown		%						
Ь	Permanent endowment ▶								
C	Term endowment ▶9		_						
3a	Are there endowment funds not in the	e possession of the	ne organiz	ation th	at are held and	admii	nistered for the	[v	es No
	organization by:							3a(i)	
	(i) unrelated organizations							3a(ii)	
b	(ii) related organizations	anizations listed a	 Is require	 don Sc	hedule R?	• •		3b	
4	Describe in Part XIV the intended us								
Par	t VI Investments—Land, Bu	ildings, and Eq	uipmen	L See F	orm 990, Parl	X, li	ne 10.		
	Description of investment	(a) Cost or of (investm			ost or other is (other)		ccumulated preciation	(d) Book	value
1a	Land								
b	Buildings				125,000		17,801		107,199
C	Leasehold improvements								<del></del>
đ	Equipment				4.256		2,507	<del></del>	1.749
e Tota	L Add lines 1a through 1e. (Column (d)	nust equal Form 9	90 Part Y	column	(B) line 10(c) )				108.948
	in race interes to appropriate (Continue)	The oque I Will 3	55, . a A.	,	(2), 10(0).)	<u>· · · · · · · · · · · · · · · · · · · </u>	·····		100.570

Part VII Investments—Other Securit		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial denvatives		
Financial derivatives  Closely-held equity interests		***
Other		
Outd.		
Total. (Column (b) must equal Form 990, Part X, col. (8) line 12.)	<b>&gt;</b>	
Part VIII Investments Program Rela		line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation.
to beaution of investment type	(b) Cook Value	Cost or end-of-year market value
	· · · · · · · · · · · · · · · · · · ·	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	<b>&gt;</b>	
Part IX Other Assets. See Form 990,		
	(a) Description	(b) Book valu
	······································	
<del></del>		
Total. (Column (b) must equal Form 990, Part X, co	al. (B) line 15.)	
Part X Other Liabilities. See Form 99		
1. (a) Description of liability	(b) Amount	T
Federal income taxes	(7)	†
Line of Credit	33,485	₫
Loan on Main House 13210904	107,240	
2001 011 110111110000 102 10007		4
		┥
	<del></del>	-∤
		<b>⊣</b>
	<del> </del>	t .
		-}
		4
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)  2. FIN 48 Footnote. In Part XIV, provide the text organization's liability for uncertain tax positions	of the footnote to the organiza	

Pana	4

Pai	t XI Reconciliation of Change in Net Assets from Form 990	to Audited Financial S	latem	ents
1	Total revenue (Form 990, Part VIII, column (A), line 12)	<i></i>	1	37,118
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	29,362
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	7,756
4	Net unrealized gains (losses) on investments		4	·····
5	Donated services and use of facilities	l	5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV.)		8	
9	Total adjustments (net). Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combi		10	7750
Pai	1 XII Reconciliation of Revenue per Audited Financial State			Heturn
1	Total revenue, gains, and other support per audited financial statement	ts	1	<del> </del>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	l a - 1		
a	Net unrealized gains on investments	28		
b	Donated services and use of facilities	2b	-{	
C	Recoveries of prior year grants	2c	-	
đ	Other (Describe in Part XIV.)	2d	۔ ا	
e	Add lines 2a through 2d		20	<del> </del>
3	Subtract line 2e from line 1		3	<del> </del>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b .	4a	4	
þ	Other (Describe in Part XIV.)	4b	┥。	
C			4c	<del>                                     </del>
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1			Notices
۲a	1 XIII Reconciliation of Expenses per Audited Financial Sta	itements with expens		er netum
1	Total expenses and losses per audited financial statements		1	<u> </u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1001		
a	Donated services and use of facilities	28	-{	
b	Prior year adjustments	2b	-{	ł
C	Other losses	2c	┥	
đ	Other (Describe in Part XIV.)	2d	٦,	1
0	Add lines 2a through 2d		20	ļ
3	Subtract line 2e from line 1		3	<del> </del>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
8	Investment expenses not included on Form 990, Part VIII, line 7b .	48	-{	
Ь	Other (Describe in Part XIV.)	4b	٦,	
c	Add lines 4a and 4b		4c 5	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, rt XIV Supplemental Information	, iine (6.)	13	<u> </u>
Con	applete this part to provide the descriptions required for Part II, lines 3, 5, 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b part to provide any additional information.	and 9; Part III, lines 1a ar ; and Part XIII, lines 2d ar	nd 4; F nd 4b.	Part IV, lines 1b Also complete
		•••••		
		••••		

Schedule D (For	m 990) 2009	Page 5
Part XIV	m 990, 2009  Supplemental Information (continued)	
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# **4562**

**Depreciation and Amortization** (Including Information on Listed Property)

OMB No.	1545-0172
20	09

Attachment ➤ See separate instructions. ► Attach to your tax return. Sequence No. 67 Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates identifying number James House 990 01-0827142 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount. See the instructions for a higher limit for certain businesses . . . . \$250,000 2 Total cost of section 179 property placed in service (see instructions) . . . . . . 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . \$800,000 3 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing (m) Description of property (b) Cost (business use only) 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 . . . 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) . 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 ▶ Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2009 . . . . . . . . 5,153 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2009 Tax Year Using the General Depreciation System Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use (e) Convention placed in **Method** (g) Depreciation deduction only-see instructions) service 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs. 5/1 h Residential rental 27.5 yrs. ММ **5/L** property 27.5 yrs. ММ S/L : Nonresidential real 39 yrs. MM S/L property S/L Section C-Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life 5/L b 12-year 12 yrs. S/L c 40-year ММ 40 yrs. **5/L** Summary (See instructions.) 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions . . . . . . 5.153

portion of the basis attributable to section 263A costs

23 For assets shown above and placed in service during the current year, enter the

															_	_
	proper	Property ( rty used for expression of the second se	ntertainme	ent, re	creation	ı, or a	muser	nent.)	•		·			·	iters	
		olumns (a) thro		-	•			_			_					, 244,
		Depreciation												_	_	
24a Do you have evidence to support the business/  (a) (b) (c) (c)  Type of property (list Date placed in		(d) Basis for depri			) epreciatio	reciation (f)		"Yes," is the evidence (cg) Method/		ce written? [ (h) Depreciation		(i) Elected section				
	vehicles first) service percentage		use			- nennn			Convention		deductio	n	179	ost		
25	Special depre- tax year and u		•							g the		25				
26	<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>				6 (366)	13000	018) .		<u> </u>	10				
			%										<del></del>			
			%													
~~	D	50% on long in	96							1			<del></del>	1_		
27	Property used	50% or less in	a quaimed		ess use:	$\neg \Box$			Т.		5/L -	Т				
			%			_	<del></del>		1		5/L -					
			%	•							6/L -					
28	Add amounts	• •		-				ine 21,	page 1		•	28				
29	Add amounts	<u>in column (i), li</u>			and on f			1100.01	· · ·	<u></u>	<u>····</u>	· · ·		29		
Com	plete this section	n for vehicles us									or relat	ed perso	on. If you	provide	ed ve	hicles
to yo	our employees, fi	rst answer the o	questions in	Section	C to see	of you	meet a	n excep	tion to	comple	ting this	section	for those	vehicle	es.	
30	during the y	Total business/investment miles driven during the year (do not include		(at) Vehicle 1			(b) (c) Vehicle 2 Vehicle					(e) Vehicle 5		v	(f) Vehicle 6	
24	commuting mile	•					-				<del>                                     </del>		$\vdash$	<del></del>	<del></del>	
	Total commuting miles driven during the year     Total other personal (noncommuting)     miles driven					.,										
33	3 Total miles driven during the year. Add lines 30 through 32															
	Was the vehicuse during off-c	tuty hours? .		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
35	Was the vehice more than 5% of													ļ	$\perp$	
36	Is another vehicuse?		·					<u> </u>			<u></u>	<u> </u>		<u></u>		
	wer these quest e than 5% owne		ine if you n	neet an	excepti									es who	are	not
37	Do you mainta your employee	•	olicy statem	ent tha	t prohib	its all	person	al use o	f vehic	es, inc	luding o	commut	ing, by	Ye	s	No
38	Do you mainta employees? So	•	•		•	•				-	-	_	by your			
39 40																
A+	use of the vehi						 ilo da~		 ion uso	 218~	inetric	· · ·	• •		$\dashv$	
41	Note: If your a												• •	ļ	J	
Pa		ization	· · · · · · · · · · · · · · · · · · ·													
	(a) (a) Description of costs.		bi) (c) ortzzation gins Amortzable amo				(d) nt Code section		P	(e) Amortization penod or percentage		(f) Amortization for this year				
42	Amortization of	costs that her	ins durina v	our 200	9 tax ve	ar (see	instruc	tions):					<del></del>			
												<del></del>				
43	Amortization of		•	-		•	 hom 4=					44				
44	Total Add an	IOUNTS IN COLUT	nn (1). 5 <del>00</del>	ine insi	LUCTIONS	IOF W	HETE IO	report	<u> </u>	<del></del>	<u></u>	. 1 44	• 1			