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Form 990

## Return of Organization Exempt From Income Tax

OMB No. 15-5-0017

Disclaimer of the Return  
Internal Revenue ServiceUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)

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

2009

Open to Public  
Inspection

A For the 2009 calendar year, or tax year beginning		, 2009, and ending	
<input type="checkbox"/> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		<b>C Name of organization</b> GOSPEL FOR MUSLIMS, INC Doing Business As Number and street (or P.O. box if mail is not delivered to street address) P.O. BOX 540294 City or town state or country and ZIP + 4 DALLAS TX 75354 <b>F Name and address of principal officer</b> Abraham Sarker, P O Box 540294, Dallas, TX 75354	
		<b>D Employer identification number</b> 03 0487825 <b>E Telephone number</b> (214) 217-9857 <b>G Gross receipts</b> \$ 460,303 00	
<b>I Tax-exempt status</b> <input checked="" type="checkbox"/> 501(c)(3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(a)</b> Is this a group return or alias? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No', attach a list (see instructions)	
<b>J Website</b> ► Gospelformuslims.com		<b>H(c)</b> Group exemption number ►	
<b>K Form of organization</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		<b>L Year of formation</b> 2002 <b>M State of legal domicile</b> TX	

## Part I Summary

1 Briefly describe the organization's mission or most significant activities  
 See Exhibit III-1, reference part III, question 1

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)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of employees (Part V, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total gross unrelated **RECEIVED** revenue from Part VIII, column (C), line 12

b Net unrelated business taxable income from Form 990-T, line 34

1617 1125 2010 1617

8 Contributions and grants (Part VIII, line 1b)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12.)

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ► 13301

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)

18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

3	14
4	13
5	10
6	10
7a	0
7b	0

Prior Year	Current Year
278586	451570
2059	491
2597	8242
283242	460303
	146807
	129771
	87547
	122811
	52501
	192716
	269819
	462334
	13423
	2031.

Beginning of Current Year	End of Year
69104	75090
3691	11708
65413	63882

20 Total assets (Part X, line 16)	
21 Total liabilities (Part X, line 20)	
22 Net assets or fund balances Subtract line 21 from line 20	

## 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 Here

Amie Sarker

11-12-10

Date

Type or print name and title

Paid	Preparer's signature	Date	Check if self employed ► <input type="checkbox"/>	Preparer's identifying number (see instructions)
Preparer's Use Only	Firm's name (or yours if self employed) and address and ZIP + 4	Pyke & Pyke, P.C. 12655 N Central Expressway, Ste 700, Dallas, TX 75243	EIN ► 75	2303529
			Phone no ► 972	366 4242
			May the IRS discuss this return with the preparer shown above? (see instructions)	Yes! No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions

Cat. No. 11282Y Form 990 (2009)

✓ → 9/14/2010

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**Part III Statement of Program Service Accomplishments**1 Briefly describe the organization's mission

Gospel For Muslims is a Christian organization dedicated to bringing hope to the 1.6 billion Muslims around the world by helping Muslims follow Christ

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes  No

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?

Yes  No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses  
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code ..... ) (Expenses \$ ..... 146,807 including grants of \$ ..... 146,807 ) (Revenue \$ ..... )

Humanitarian Aid for Rural Development (HARD) HARD is a non-governmental organization (NGO) currently working in Bangladesh with the purpose of engaging in community transformation through eradicating poverty, eradicating illiteracy, and establishing God-fearing communities. The organization provides program services to over 5,300 families in rural parts of the country who are members of the NGO. Micro-loans are distributed to those in poverty to assist rural entrepreneurs in coming out of poverty with dignity. The Clinic provides free medical visits to the NGO doctor and a pharmacy with medicine provided at cost. Seven primary schools provide foundational skills education to young children. Humanitarian Aid such as food, mosquito nets, clothing, and agricultural support for farmers meet physical needs and show the love of Christ. These acts of compassion provide opportunities to build relationships of trust with villagers. As relationships are built our ministry has the opportunity to share the gospel message and disciple new believers.

4b (Code ..... ) (Expenses \$ ..... 88,796 including grants of \$ ..... ) (Revenue \$ ..... 50,879 )

Mission Trips to Bangladesh Gospel For Muslims takes Christian volunteers on mission trips to Bangladesh where they support the work of the ministry there through sharing the Gospel with villagers, discipling new believers, and distributing humanitarian aid such as micro-loans, school supplies, mosquito nets, food, and eyeglasses. In 2009, the ministry took volunteer teams (32 participants) on mission trips in February, August, and October.

4c (Code ..... ) (Expenses \$ ..... 46,604 including grants of \$ ..... ) (Revenue \$ ..... 61,983 )

Domestic Ministry Gospel For Muslims equips Christian believers for outreach to Muslims through its annual MBB (Muslim Background Believers) conference (over 440 attendees in 2009) as well as through "GFM Institute" trainings in churches across the nation (4,000+ believers trained during 40+ speaking engagements). The ministry also engages Muslim Background Believers in ministry to Muslims within their local communities. Evangelistic and discipleship efforts extend to web-based outreach, including the site, www.WhyIsa.org, where dialogue about Jesus is facilitated between Muslims and Christians. GFM engages believers in prayer for Muslims through a weekly "prayer call" email communication that is distributed to over 2,000 contacts each week.

4d Other program services (Describe in Schedule O )  
(Expenses \$ ..... including grants of \$ ..... ) (Revenue \$ ..... )

4e Total program service expenses ►

**Part IV** Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

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 I

4 **Section 501(c)(3) organizations** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II

5 **Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III

6 Did the organization maintain 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 I

7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II

8 Did the organization maintain collections of works of art, historical treasures or other similar assets? If "Yes," complete Schedule D, Part III

9 Did the organization report an amount in Part X, line 2i, 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

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, 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 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 report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
- Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part XI

12 Did the organization obtain separate independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII

12A Was the organization included in consolidated independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I

15 Did the organization report on Part IX, column (A), line 3 more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II

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

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

	Yes	No
1	✓	
2	✓	
3		✓
4		✓
5		✓
6		✓
7		✓
8		✓
9		✓
10		✓
11		✓
12		
12A		
13		✓
14a		✓
14b	✓	
15	✓	
16	✓	
17		✓
18		✓
19		✓
20		✓

**Part 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	✓
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	✓
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	✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	✓
c	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	✓
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	✓
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	✓
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	✓
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	✓
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)	28a	✓ X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c	✓
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	29	✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30	✓
30	Did the organization receive contributions of art, historical treasures or other similar assets or qualified conservation contributions? If "Yes," complete Schedule M	31	✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32	✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33	✓
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	34	✓
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	35	✓
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	36	✓
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	37	✓
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	38	✓
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		

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a 0	
1b		1b 0	
1c		1c ✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 10	
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b ✓	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a ✓	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b —	
4a	At any time during the calendar year did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a ✓	
b	If "Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-221, 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 ✓	
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 Prohibited Tax Shelter Transaction?	5c —	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a ✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b —	
7	Organizations that may receive deductible contributions under section 170(c)	—	
a	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 ✓	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b —	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c ✓	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d 1	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e —	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f ✓	
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g ✓	
h	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 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 ✓	
9	Sponsoring organizations maintaining donor advised funds	—	
a	Did the organization make any taxable distributions under section 4966?	9a ✓	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b ✓	
10	Section 501(c)(7) organizations Enter	—	
a	Initiation fees and capital contributions included on Part VIII, line 12	10a 0	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b 0	
11	Section 501(c)(12) organizations Enter	—	
a	Gross income from members or shareholders	11a 0	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b 0	
12a	Section 4947(a)(1) non-exempt charitable trusts Is the organization filing Form 990 in lieu of Form 1041?	12a ✓	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b —	

**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

**Section A Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body	1a	14
b Enter the number of voting members that are independent	1b	13
2 Did any officer, director, trustee or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2	✓
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	✓
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	✓
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	✓
6 Does the organization have members or stockholders?	6	✓
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	✓
b 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 during the year by the following		
a The governing body	8a	✓
b Each committee with authority to act on behalf of the governing body?	8b	✓
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A who cannot be reached at the organization's mailing address? If "Yes" provide the names and addresses in Schedule O	9a	✓

**Section B Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	10a	✓
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	✓
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	✓
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓
b Are officers, directors or trustees and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes" describe in Schedule O how this is done	12c	✓
13 Does the organization have a written whistleblower policy?	13	✓
14 Does the organization have a written document retention and destruction policy?	14	✓
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director or top management official	15a	✓
b Other officers or key employees of the organization	15b	✓
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	✓
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	✓

**Section C Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed ► Texas
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply
 

Own website  Another's website  Upon request
- 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► Abraham Sarker - 2351 W Northwest Highway, Dallas, TX 75220 214-217-9857

**Part VI 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 compensate any current officer, director, or trustee.

(A) Name and title	(B) Ave. no. of hours per week for director	(C) Position (check all that apply)	(D) Reportable compensation from the organization (W-2 1099-MISC)	(E) Reportable compensation from related organizations (W-2 1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Abraham Sarker, President/Director	40+	<input checked="" type="checkbox"/> Ind. or alt. trustee <input checked="" type="checkbox"/> Officer <input checked="" type="checkbox"/> Employee <input checked="" type="checkbox"/> Highest compensated employee <input checked="" type="checkbox"/> Director	19997		40000
Amie Sarker		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
See list of directors attached. Only Dr. Abraham Sarker and Dr. Amie Sarker received any compensation as listed above.					

**Part VII** Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

**1b Total**

2 Total number of individuals (including but not limited to those listed above) who received more than \$100 000 in reportable compensation from the organization ►

		Yes	No
3	Did the organization list any former officer, a rector or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	✓
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150 000? If "Yes," complete Schedule J for such individual	4	✓
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5	✓

## Section B Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100 000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100 000 in compensation from the organization ►

## Part VII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants and similar amounts not included above	1f	456287			
	g Noncash contributions included in lines 1a-1f		4717			
	h Total Add lines 1a-1f		451570			
Program Service Revenue		Business Code				
	2a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total Add lines 2a-2f		►			
Other Revenue	3 Investment income (including dividends, interest and other similar amounts)		491			
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross Rents	(i) Real	(ii) Personal			
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)		►			
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b Less cost or other basis and sales expenses						
c Gain or (loss)						
d Net gain or (loss)		►				
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a					
b Less direct expenses	b					
c Net income or (loss) from fundraising events	►					
9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses	b					
c Net income or (loss) from gaming activities	►					
10a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory	►					
11a Miscellaneous Revenue	Business Code					
b Book Sales		4777				
c Refund Texas Workforce Com Advanta Card, Etc		1439				
d All other revenue		2026				
e Total Add lines 11a-11d	►	8242				
12 Total revenue See instructions	►	460303				

\* Car donated in 2008 sold in 2009 for  
less than original value.

**Part X Statement of Functional Expenses**

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	146807	146807		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	59997	59997		
6 Compensation not included above, to disqualifying persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	49795	49795		
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	9169	9169		
10 Payroll taxes	3850	3850		
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	12958		12958	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	3349	3225	124	
6691				6691
12 Advertising and promotion	8383		8383	
13 Office expenses	5750	5628		122
14 Information technology				
15 Royalties				
16 Occupancy	28117	28117		
17 Travel	78300	73531	4769	
18 Payments of travel or entertainment expenses for any federal, state or local public officials				
19 Conferences, conventions, and meetings	32561	32561		
20 Interest	874		874	
21 Payments to affiliates				
22 Depreciation, depletion and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a Cost-Books, Publications	244	244		
b Domestic Ministry Expense	3950	3950		
c Telephone/Internet	2918	2918		
d Bank and Credit Card Fees	2143		2143	
e Donor Development	6478			6478
f All other expenses				
25 Total functional expenses. Add lines 1 through 24	462334	419792	29251	13291
26 Joint costs. Check here <input checked="" type="checkbox"/> 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) Beginning of year	(B) End of year
Assets	1 Cash—non-interest-bearing	24499	1 41986
	2 Savings and temporary cash investments	31164	2 31755
	3 Pledges and grants receivable, net	3	
	4 Accounts receivable, net	4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	5	
	6 Receivables from other disqualified persons (as defined under section 4958(i)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L	6	
	7 Notes and loans receivable, net	7	
	8 Inventories for sale or use	9217	8
	9 Prepaid expenses and deferred charges	4224	9 1349
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	
	b Less accumulated depreciation	10b	10c
	11 Investments—publicly traded securities	11	
	12 Investments—other securities See Part IV, line 11	12	
	13 Investments—program-related See Part IV, line 11	13	
	14 Intangible assets	14	
	15 Other assets See Part IV, line 11	15	
	16 Total assets Add lines 1 through 15 (must equal line 34)	69104	16 75090
Liabilities	17 Accounts payable and accrued expenses	3691	17 6708
	18 Grants payable	18	
	19 Deferred revenue	19	
	20 Tax-exempt bond liabilities	20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D	21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	22	5000
	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	25	
	26 Total liabilities Add lines 17 through 25	3691	26 11708
Net Assets or Fund Balances	27 Unrestricted net assets	27	
	28 Temporarily restricted net assets	28	
	29 Permanently restricted net assets	29	
	30 Capital stock or trust principal, or current funds	30	
	31 Paid-in or capital surplus, or land, building, or equipment fund	65413	31 63382
	32 Retained earnings endowment, accumulated income or other funds	32	
	33 Total net assets or fund balances	33	
	34 Total liabilities and net assets/fund balances	69104	34 75090

**Part X** Financial Statements and Reporting

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 Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?  
b Were the organization's financial statements audited by an independent accountant?  
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
If the organization changed either its oversight process or selection process during the tax year explain in Schedule O

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both  
 Separate basis  Consolidated basis  Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  
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

	Yes	No
2a		✓
2b	✓	
2c	✓	
3a		✓
3b		

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

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2009**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization

Gospel for Muslims, Inc

Employer identification number

03 0487825

**Part I** Reason for Public Charity Status (All organizations must complete this part) See instructions

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)
- 2  A school described in section 170(b)(1)(A)(ii) (Attach Schedule E)
- 3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii)
- 4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city and state
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv) (Complete Part II)
- 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v)
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II)
- 8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
- 9  An organization that normally receives (1) more than 33½% 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 33½% 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.
  - a  Type I      b  Type II      c  Type III—Functionally integrated      d  Type III—Other
  - 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 509(a)(1) or section 509(a)(2)
  - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
  - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
    - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
    - (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?
  - h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization described on lines 1-9 above or IHC section (see instructions)	(iv) Is the organization in col. (i) listed in your governing document?	(v) Do you control the organization in col. (i) of your charter?	(vi) Is the organization in col. (i) organized in the U.S.?	(vii) Amount of support	Yes	No	Yes	No	Yes	No
							Yes	No	Yes	No	Yes	No
Total												

## Supplemental Financial Statements

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

OMB No 1545 0047

**2009**

**Open to Public  
Inspection**

Name of the organization

GOSPEL FOR MUSLIMS, INC

Employer identification number

03 0487825

**Part I** Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Part II** Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)	<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
	<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
	<input type="checkbox"/> Preservation of open space	
2 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		
		<b>Held at the End of the Tax Year</b>
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06	2d	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►		
4 Number of states where property subject to conservation easement is located ►		
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►		
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$		
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9 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		

**Part III** Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. 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	
(i) Revenues included in Form 990, Part VIII, line 1	► \$
(ii) Assets included in Form 990, Part X	► \$
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	
a Revenues included in Form 990, Part VIII, line 1	► \$
b Assets included in Form 990, Part X	► \$

**Part III** Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a <input type="checkbox"/> Public exhibition	d <input type="checkbox"/> Loan or exchange programs
b <input type="checkbox"/> Scholarly research	e <input type="checkbox"/> Other
c <input type="checkbox"/> 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?  Yes  No

**Part 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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIV

**Part V** Endowment Funds Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ► %  
 b Permanent endowment ► %  
 c Term endowment ► %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations  
 (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

Yes	No
3a(i)	
3a(ii)	
3b	

**Part VI** Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10

	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B) line 10(c)) ► |

**Part VII** Investments—Other Securities. See Form 990, Part X, line 12

(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 derivatives		
Closely-held equity interests		
Other		

Total (Column (b) must equal Form 950, Part X, col (B) line 12) ►

**Part VIII** Investments—Program Related See Form 990 Part X, line 13

Total (Column 'G') must equal Form 550, Part X col 'E' (line 13) ►

**Part IX** Other Assets. See Form 990, Part X line 15

(a) Description	(b) Bool value

Total (Column (b) must equal Form 990 Part X, col (B) line 15)

**Part X** Other Liabilities. See Form 990, Part X, line 25

2. FIN 48 Footnote. In Part XIV, provide the text of

<sup>2</sup> FIN 48 Footnote: In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	460,303
2 Total expenses (Form 990, Part IX, column (A), line 25)	2	462,334
3 Excess or (deficit) for the year Subtract line 2 from line 1	3	(2,031)
4 Net unrealized gains (losses) on investments	4	
5 Donated services and use of facilities	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 Combine lines 3 and 9	10	(2,031)

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1 Total revenue, gains, and other support per audited financial statements	1	442,535
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments	2a	
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIV)	2d	
e Add lines 2a through 2d	2e	0
3 Subtract line 2e from line 1	3	442,535
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	
b Other (Describe in Part XIV)	4b	17,768
c Add lines 4a and 4b	4c	17,768
5 Total revenue Add lines 3 and 4c (This must equal Form 990, Part I, line 12)	5	460,303

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1 Total expenses and losses per audited financial statements	1	460,978
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIV)	2d	
e Add lines 2a through 2d	2e	0
3 Subtract line 2e from line 1	3	460,978
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV)	4b	1,356
c Add lines 4a and 4b	4c	1,356
5 Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5	462,334

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

EXPLANATION Part XII 4 b This represents the difference in timing recognition between "Cash Basis" vs "GAAP Basis"

and is mainly from pledges receivable \$17,768

EXPLANATION Part XIII 4 b This represents the difference in timing and treatment between "Cash Basis" vs "GAAP"

and is mainly due to payables and capitalization of assets and depreciation of \$1,356

## Statement of Activities Outside the United States

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16

GEN NO 1945 00 7

2009

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Gospel for Muslims, Inc.

Employer identification number  
03 0487825

**Part IV** General Information on Activities Outside the United States Complete if the organization answered "Yes" to Form 990 Part IV, line 14b

1 For grantmakers Does the organization maintain records to substantiate the amount of the grant's or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

2 For grantmakers Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed )

For Bill

**Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990 Part IV line 15 for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Schedule F-1 (Form 990) if additional space is needed. ►

**Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990 Part IV line 15 for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Schedule F-1 (Form 990) if additional space is needed. ►

1 (a) Name of Organization		(b) IPS category	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Method of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, fair, practical, cost)
	So Asia (Bangladesh)								
	So Asia (Bangladesh)		Micro Loans		91386	Wires			
	So Asia (Bangladesh)		School Oper		7840	Wires			
	So Asia (Bangladesh)		Medical Sup		10037	Wires			
	So Asia (Bangladesh)		Human Aid		17010	Wires			
	South Asia		Missionary S		4069	Checks			
	So Asia (Bangladesh)		Leadership Dev		5329	Wires			
	So Asia (Bangladesh)		Phys Resourc		11136	Wires			
			Name of Organization						
			HARD (Humanitarian Aid for Rural Develop), an NGO						

2 Enter "otai" number of recipient organization, listed above that are recognized as charities by the foreign country recognized as tax-exempt  
3 by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

**Part IV****Supplemental Information**

Complete this part to provide the information required in Part I, line 2, and any additional information

**Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds**

Recipient organization representatives provide regular reports on funds received and how the funds were used toward specific program services. The Gospel For Muslims Executive Director communicates regularly with the recipient organization representatives. The Ministry's Internal Auditor may review a grantee's financial records at his discretion.



SCHEDULE O  
(Form 990)

Supplemental Information to Form 990

OMB No. 1545-0047

2009

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

Gospel for Muslims Inc

► Attach to Form 990

Employer identification number

03 0487825

Re Part IV, Question 38 and Part VI, lines 11 and 19

VI (II) Prior to filing 990, the organization provided a copy of the 990 to all members of its governing body via e-mail which required a response

VI (19) The 990, the organization's governing documents, conflict of interest policy and audited financial statements are available to the public at the organization's office upon request and via a link shown on the organization's website

VI- Section B (12c) Each member of the board has been requested in writing to acknowledge receipt of Article II, Section 15 Bylaws (conflict of interest) prior to receiving a completed copy of the 990 and to submit a positive reply that (a) they have no conflict of interest or (b) if they do have a conflict to attach an explanation of same

See page 2 - Directors

Gospel For Muslims, Board of Directors Roster 2009  
As of 12/31/2009

Name	Committee	Address	City/TX/Zip	Home Phone	Business Phone
1 Sadler, Harold (Chairman)	International & Nominating	1007 S Main	Henderson TX 75054	903 657 2615	903 646 0906
2 Hefner, Laura (Vice Chair)	International	7001 Preston Road, Suite 200/LB 18	Dallas TX 75205	214 368 8940	214 520 2800x101
3 Barnes, Stephen (Secretary)	Domestic & Financial Affairs	3629 Hayne Ave	Dallas TX 75205	214 219 6688	972 643 3201
4 Sarker, Dr Abraham (Director)	Nominating, Domestic, International & Financial Affairs	P O Box 1533882	Living. TX 75015-3882	972 554 9230	214 217 9857
5 Alexander, Art	Nominating & Financial Affairs	5030 Shadywood Ln	Dallas TX 75209	214 351 5154	972 386 1333
6 Griffin, Dr Dan	Nominating, Domestic, International & Financial Affairs	2407 Meandering Way	Arlington TX 76011	817 543 0048	214 942 8601
7 Cook, Dr Sheila	Domestic	3000 Mountain Creek Pkwy	Dallas, TX 75211	214 333 5678	214 833 5130
8 Hallton, Ruth	Domestic & International	9009 Westwood Shores Dr	Fort Worth TX 76111	817 236 4209	
9 Palmer, James F	Financial Affairs & International	P O Box 223911	Dallas TX 75222-3911		214 801 4226
10 Jackson, Derrah	Domestic	9215 San Fernando Way	Dallas, TX 75218-3656	214 321 4933	
11 Kalmikov, John	Financial Affairs	971 Mangrove Cr	Corona, CA 92881	951 279 7668	909 605 1100
12 Anderson, Dr Carl	Domestic	1618 Villanova Dr	Richardson TX 75081	972 690 8951	972 690 9535x113
13 Howard, Bob	Domestic	3825 Purline	Dallas TX 75225	214 869 0251	469 644 5539
14 Bowman, Hil	Domestic & International	5950 Berkshire Lane Suite 600	Dallas TX 75225	214 599 0688	214 696 7161

2009 – Form 990  
Reference Part III – Question 1.  
“What's the organizations primary exempt purpose?”

**GOSPEL FOR MUSLIMS, INC.**

Narrative Description of Your Activities

Gospel For Muslims, Inc. is a non-profit Christian organization dedicated to bringing hope to the 1.3 billion Muslims around the world. Dr. Abraham Sarker (ordained minister), a former Muslim, and wife, Dr. Amie Sarker founded GFM, Inc. to strive to help Muslims follow Christ through outreach, discipleship and equipping churches for Muslim evangelism.

Approximately one-fifth of the world's population is Muslim. By the end of the twenty-first century, that number is expected to increase to a full quarter of the earth's population.

The ministry's mission seeks to partner with believers in Christ to bring eternal hope to the millions of Muslims through witness, discipleship and church planting.

The ministry goals are to

- 1 Disciple and equip Muslims background believers for ministry within the Body of Christ
- 2 Equip believers to effectively share the Gospel of Jesus Christ with Muslims in the U.S. and around the world
- 3 Assist churches in developing their Muslim outreach ministry
- 4 Recruit and train personnel who will form teams to evangelize, make disciples and plant churches among Muslim people groups
- 5 Develop materials and platforms for effective outreach to and discipleship of Muslims worldwide
- 6 Work together with national believers, other agencies and local churches who share our vision
- 7 Mobilize prayer and financial resources

Also Reference Part I  
Question 1

Exhibit III-1 fc page 2

Form 990  
Reference Part VI, Section B Question 12a  
Article II, Sec. 15 Bylaws

GOSPEL FOR MUSLIMS, INC.

Section 15 All Board Members shall disclose to the Board any possible conflict of interest at the earliest practicable time. No Board member shall vote on any matter, under consideration at a Board or committee meeting, in which such Board member has a conflict of interest. The minutes of such meeting shall reflect that a disclosure was made and that the Board Member who is uncertain whether a conflict of interest may exist in any matter may request the Board or committee to resolve the questions by majority vote.

A Board Member shall be considered to have a conflict of interest if (a) such Board member has existing or potential financial or other interest which impair or might reasonably appear to impair such member's independent, unbiased judgment in the discharge of his or her responsibility to the Corporation, or (b) such Board member is aware that a member of his or her family (which for purposes of this paragraph shall be a spouse, parents, siblings, children and any other relative if the latter reside in the same household as the Board Member), or any organization in which such Board member (or member of his or her family) is an officer, director, employee, member, partner, trustee or controlling stockholder, has such existing or potential financial or other interests.

Form **8868**

(Rev. April 2009)

Department of the Treasury  
Internal Revenue Service

## Application for Extension of Time To File an Exempt Organization Return

OMB No 1545 1709

► File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ►
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

### **Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ►

*All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns*

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you can not file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits

Type or print	Name of Exempt Organization <b>GOSPEL FOR MUSLIMS, INC.</b>	Employer identification number 03 : <b>0487825</b>
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O box, see instructions <b>P O BOX 540294</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>DALLAS, TX 75354</b>	

Check type of return to be filed (file a separate application for each return)

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

• The books are in the care of ► **ABRAHAM SARKER**

Telephone No ► ( **214** ) **217-9857** ..... FAX No ► ( **214** ) **217-9860** .....

• If the organization does not have an office or place of business in the United States, check this box ►

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box ►  If it is for part of the group, check this box ►  and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15**, 20**10**, to file the exempt organization return for the organization named above. The extension is for the organization's return for  
►  calendar year 20**09** or  
►  tax year beginning ..... , 20 ....., and ending ..... , 20 .....

2 If this tax year is for less than 12 months, check reason  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a \$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b \$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c \$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box ►
- Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

**Part II Additional (Not Automatic) 3-Month Extension of Time** Only file the original (no copies needed)

Type or print	Name of Exempt Organization <b>GOSPEL FOR MUSLIMS, INC.</b>	Employer identification number <b>03 0487825</b>
File by the extended due date for filing the return. See instructions	Number, street, and room or suite no. If a P O box, see instructions <b>P O BOX 540294, 2351 W NORTHWEST HWY</b>	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>DALLAS, TX 75354</b>	

Check type of return to be filed (File a separate application for each return)

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(e) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of ► **DR ABRAHAM SARKER**

Telephone No ► ( 214 ) 217-9857 FAX No ► ( 214 ) 217-9860

- If the organization does not have an office or place of business in the United States, check this box ►

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box ►  If it is for part of the group, check this box ►  and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until NOVEMBER 15 2010
- 5 For calendar year 2009, or other tax year beginning 20 and ending 20
- 6 If this tax year is for less than 12 months, check reason  Initial return  Final return  Change in accounting period
- 7 State in detail why you need the extension DR ABRAHAM SARKER, EXECUTIVE DIRECTOR IS OUT OF THE COUNTRY A COMPLETE AND ACCURATE RETURN CANNOT BE COMPLETED UNTIL HE RETURNS

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions

8a \$

b If this application is for Form 990-PF, 990-T, 4720 or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868

8b \$

c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions

8c \$

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ►

Title ► C.P.A.

Date ► 8-3-2010

Form 8868 (Rev. 4-2009)