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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form. 2009

OMB No. 1545-1150

Open to Public

Department of the Treasury

Internal Revenue Service				▶ The organization may have to use a copy of this return to satisfy state reporting	g requireme	nts.		Порсолон
			ar year.	or tax year beginning , 2009, and e	nding			, 20
_		applicable.	Please	C Name of organization		D Empl	over ident	ification number
	Address	` '	use IRS	Renewanation]	~ · · · · · · · · · · · · · · · · ·	-	901081
=	Name ch	- 1	label or print or		n/suite I	F Telen	hone num	
	initiai reti	turn	type.		.v.sono	L TOICE		
	Terminat	ted	See Specific	3230 King Street NE			· · · · · · · · · · · · · · · · · · ·	82-1223
	Amended	d return	Instruc-	City or town, state or country, and ZIP + 4	ļ.	F Grou	ıp Exemp	tion
	Applicati	ion pending	tions.	Roanoke, VA 24012-6421			ıber ▶	
	• Sec	tion 501(c)(3)	organiz	ations and 4947(a)(1) nonexempt charitable trusts must attach	G Accoun	ting Me	ethod:	Cash Accrual
			a cor	npleted Schedule A (Form 990 or 990-EZ).	Other (s	specify)	>	
					H Check	▶ 🗹 :	if the ora	anization is not
1.	Nebsi	te: ► www	.renewa	nation.org				dule B (Form 990,
J 1	ax-ex	empt status (check o	nly one) — ✓ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527	990-EZ			, ,
	Check			zation is not a section 509(a)(3) supporting organization and its gross received				than \$25,000 A
			_	rum is not required, but if the organization chooses to file a return, be su		-		
		•		9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of f			\$	328,023
	art I			enses, and Changes in Net Assets or Fund Balances (S				
-				······································				
	1		. •	s, grants, and similar amounts received			1	223,615
	2	-		evenue including government fees and contracts		• •	2	
	3		•	and assessments			3	0
	4	Investment					4	0
	5a	Gross amo	ount fro	m sale of assets other than inventory 5a		0	.	
	b	Less: cost	or othe	r basis and sales expenses		0		
	C	Gain or (los	ss) fron	sale of assets other than inventory (Subtract line 5b from line 5a	a)		5c	0
3	6	Special event	s and act	ivities (complete applicable parts of Schedule G). If any amount is from gaming, ch	heck here			
Revenue	а	Gross reve	nue (no	ot including \$ of contributions		l	[]	
ۅٞ	_			6a		0		
	Ь	•		nses other than fundraising expenses 6b	·	0		
<u> </u>	C		-	ss) from special events and activities (Subtract line 6b from line 6	ia)		6c	0
7	7a		•	entory, less returns and allowances	α,	1908		
	I -					2066		
~	b		_			2000	70	-158
2	C	•	•	ss) from sales of inventory (Subtract line 7b from line 7a)			7c	
=	8			scribe Building and office equipment		—'	8	102,500
	9			dd lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	D···	. 🏲	9	325,957
	10			r amounts paid (attach schedule)			10	38,500
えら	11	Benefits pa	aid to o	r for members	:• · \		11	0
3 (S	12	Salaries, o	ther co	mpensation, and employee benefits MAY 1 4 201	10 . 05		12	125,436
E	13	Profession	al fees	and other payments to independent contractors	<u>기</u> 또	[13	46,700
EX PONT	14	Occupancy	y, rent,	utilities, and maintenance	JT		14	1,228
ũ	15	Printing, pr	ublicati	ons, postage, and shipping			15	13,907
	16	Other expe	enses (d	describe Affiliates, Oper Exp., Travel & Meetings, and Vehicle) [16	4,309
	17			Add lines 10 through 16		. ▶	17	230,080
S	18			for the year (Subtract line 17 from line 9)			18	95,877
Net Assets	19		• •	d balances at beginning of year (from line 27, column (A)) (mus		,		
355				reported on prior year's return)			19	42,852
¥	20	•	_	net assets or fund balances (attach explanation)			20	0
ž	21		_	balances at end of year. Combine lines 18 through 20			21	138,729
Đ	art II			ts. If Total assets on line 25, column (B) are \$1,250,000 or more				
	er t II	_ Data i C	- J. 100	(See the instructions for Part II.)	(A) Begir			(B) End of year
_				•	ha señii			,
22		-		vestments		3	7,252 22	
23					<u></u>		0 23	
24		•		e ► Vehicle and Office Equipment			5,600 24	
2		otal assets .			<u></u>	4:	2,852 2 5	
26		otal liabilitie					0 26	
27	7 N	let assets or	fund t	alances (line 27 of column (B) must agree with line 21)		4:	2,852 27	138,729

_		the state of the s					
Part III Statement of Program Service Accomplishments (See the instructions for Part III.)							
What	is the organization's primary exempt purpose?	To promote Christian Educa	xplanation	(Required for section			
	ribe what was achieved in carrying out the org						
	er, describe the services provided, the number of	of persons benefited, and o	other relevant info	rmation for		a)(1) trusts; optional	
each	program title.				for ot		
28	See attached statement		., -, -, -, -, -, -, -, -, -, -, -, -, -,				
	(Grants \$ 38,500) If this amount	includes foreign grants, che	ock boro	N (1)	28a	230,080	
29	Column 4 colored in this amount	includes loreign grants, che	CK HOIG	البيا 💆 .	200	200,000	
28		1					
	(Grants \$) If this amount	includes foreign grants, che	eck here	<u>. ▶ ⊔</u>	29a	0	
30							

	(Grants \$) If this amount	includes foreign grants, che	eck here	. ▶ 🗆	30a	0	
31	Other program services (attach schedule)						
	(Grants \$) If this amount	includes foreign grants, che	eck here	. ▶ 🗆	31a	0	
	Total program service expenses (add lines 28a t				32	230,080	
Part						tions for Part IV.)	
		(b) Title and average	(c) Compensation	(d) Contribution		(e) Expense	
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benefit deferred comper		account and other allowances	
Malu	n L. Adams	devoted to position	Giller V)	delerred compa	ISQUOIT	Other allowances	
		President & CEO 40 hrs	F0 000		500		
	Vysong Mill Rd, Hardy, VA 24101		50,000		500	0	
	y Keaton	Founder & Chairman	Chairman 0		_	_	
	enmar Ave SE, Roanoke, VA 24013				0	0	
	Campbell	Financial Advisor					
650 N	Iontrose Ave SE, Roanoke, VA 24013		0		0	0	
David	i Blanton	V. Pres Developement 40hr					
2042	Maiden Lane SW, Roanoke, VA 24015	v. Fres Developement 40m	43,000 43,000		385	0	
Joy F	tenee Thomas	0.00					
1213	Navigation Pt., Goodview, VA 24095	Office Manager 30hrs	17,400		0	0	
Esthe	er Burton		,				
204 0	ilendale Drive, Vinton, VA 24179	Accountant 15hrs	o		0	o	
	yl Turner						
	uragona Drive, Vinton, VA 24179	Board Member	n		0	o	
	teve Ridout		-	·		_	
	Belmont Court, Roanoke, VA 24012	Board Member		0	0		
			0			<u> </u>	
	y Stouffer	Board Member	_				
	cranberry Drive, Chambersburg, PA 17202		0		0	0	
	ey Ganthner	Board Member					
3236	Joplin Lane, Chesapeake, VA 23323	0			0	0	
Gary	Feazell	Board Member	Roard Mombor				
1100	Beachnut Lane, Moneta, VA 24121		0		0	0	
		}					
	<u></u>			-			
		1					
		 					
		1					
		}					
		1					

Part	Other Information (Note the statement requirements in the instructions for Part V.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		1
		35b	<u> </u>	
36	If "Yes," has it filed a tax return on Form 990-T for this year?	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
Ь	Did the organization file Form 1120-POL for this year?	37b		1
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		1
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:	1		
а	Initiation fees and capital contributions included on line 9		•	
b	Gross receipts, included on line 9, for public use of club facilities	1	,	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	1		
	section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit	1		
	transaction during the year or is it 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	40b		1
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on	132		
J	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		 	
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed. ▶ Virginia			<u> </u>
42a		540-89	0-265	3
	Located at ▶ 204 Glendale Drive, Vinton, VA ZIP + 4 ▶	24179	-4414	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	account)?	42b		1
	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.			
		40-		./
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	l	· •
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. 1	▶ ⊔
	and enter the amount of tax-exempt interest received or accrued during the tax year			0
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			_
	Form 990-EZ	44	ļ	✓
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If			
	"Yes," Form 990 must be completed instead of Form 990-EZ	45		✓

Page	4

Part \	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 and	section 4947(a)(1) n 17(a)(1) nonexempt o nd 51.	onexempt c charitable trus	haritab sts mus	le trusts only. At answer question	il sec ns 46	tion 3-491	0	
	Did the organization engage in direct or indirect				in opposition to		Yes	No	
	candidates for public office? If "Yes," complete \$	· ·				46		1	
	Did the organization engage in lobbying activities					47		✓	
	Is the organization a school as described in section		•			48		<u> </u>	
	Did the organization make any transfers to an ex	•	_	ation? .		49a		-	
	If "Yes," was the related organization a section 5 Complete this table for the organization's five high	•	 mnlovece (othe	or than o		49b	ac an	d key	
	employees) who each received more than \$100,0								
	(a) Name and address of each employee paid more than \$100,000 (b) Title and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans & deferred compensation								
NONE							allowa		
				• •			-		
									
							····-		
									
f	Total number of other employees paid over \$100	0.000	NONE		1,, .,,,	·			
NONE	(a) Name and address of each independent contractor	paid more than \$100,000		(b) Typ	pe of service	(c) Co	npens	ation	
d	Total number of other independent contractors e	each receiving over \$1	00,000	>	NONE				
	Under penalties of penury, I declare that I have examine and belief, it is true, correct, and complete. Declaration	ed this return, including according of preparer (other than office	mpanying schedu er) is based on all i	les and sta information	tements, and to the best of which preparer has	any kno	knowl	edge e.	
Sign Here	Signature of officer Date						110		
	Melvin L. Adams, President Type or print name and title								
Paid	Preparer's signature	Dat	self-	k if	Preparer's identifying nur	nber (Se	 e instruc	tions)	
Prepare	Firm's name (or		1 5	Ein	\				
Use On	yours if self-employed), address, and ZIP + 4				one no. ▶				
May th	e IRS discuss this return with the preparer shown	n above? See instructi	ons		▶ [Yes		No (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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Pa	rt I	Reason	for Public Ch	narity Status (All or	ganizatio	ons mus	t compl	ete this	part.) Se	e instruc	ctions.
The	orga	anization is n	ot a private four	dation because it is:	(For lines	1 throug	gh 11, ch	eck only	one box.)	
1		A church, co	onvention of chu	rches, or association	of churc	hes desc	ribed in s	ection 1	70(b)(1)(A	A)(i).	
2		A school des	scribed in sectio	on 170(b)(1)(A)(ii). (At	tach Sch	edule E.)					
3		•	*	hospital service orgar					·		
4				ation operated in con	junction v	with a ho	spital de	scribed i	n section	170(b)(1)(A)(iii). Enter the
			ame, city, and st								
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, st	ate, or local gov	ernment or governme	ental unit	describe	d in sect	ion 170(t	b)(1)(A)(v)).	
7				y receives a substanti (1)(A)(vi). (Complete F		its suppo	ort from a	governm	nental uni	t or from	the general public
8		A community	y trust described	d in section 170(b)(1)	(A)(vi). (C	Complete	Part II.)				
9	Z	receipts from	n activities relate n gross investm	y receives: (1) more the ed to its exempt func- ent income and unre a after June 30, 1975.	tions-su elated bus	ibject to i siness ta	certain ex xable inc	ceptions ome (les	s, and (2) s section	no more	than 331/3 % of its
10 11		An organization	tion organized a	nd operated exclusive and operated exclusive blicly supported organ at describes the type	vely for th	he benefi describe	it of, to p d in secti	perform to on 509(a)	he function (1) (1) or sec	ons of, o ction 509((a)(2). See section
		a ☐ Type		_	: Typ						Type III-Other
е		By checking persons other	this box, I cer	tify that the organization managers and othe	tion is no	ot control	lled direc	tly or inc	directly by	y one or	more disqualified
f g		organization Since Augus	, check this box at 17, 2006, has	a written determinat the organization acce							III supporting
		following pe									[]
				r indirectly controls, on the sup				th persor	ns describ	oed in (ii)	11g(i)
				erson described in (i)							11g(ii) 11g(iii)
h		• •	-	of a person described							[1.8/m/]
		ne of supported rganization (ii) EIN				(iv) Is the organization		(v) Did you notify		s the ion in col zed in the S ?	(vii) Amount of support
					Yes	No	Yes	No	Yes	No	
						 					
											
					_						
Tota	ai					1		1			

Pai	Support Schedule for Org (Complete only if you chec	janizations l ked the box	Described in on line 5, 7, or	Sections 17 or 8 of Part I.	0(b)(1)(A)(iv) .)	and 170(b)	(1)(A)(vi)
Sec	tion A. Public Support						
Ça	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	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	_					
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6_	Public support. Subtract line 5 from line 4.		<u> </u>				
	tion B. Total Support				,		·
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4		<u> </u>		· · · ·		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	-					
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10 .		L				<u> </u>
12	Gross receipts from related activities, etc	•	•			12	
13	First five years. If the Form 990 is for organization, check this box and stop he	re	<u> </u>				
Sec	tion C. Computation of Public Su					т	
14	Public support percentage for 2009 (line					14	%_
15	Public support percentage from 2008 Sch	nedule A, Part	II, line 14 .			15	%
16a	33% % support test—2009. If the organization qualifies	as a publicly	supported organ	nization			▶ □
b	33% % support test—2008. If the organization qua						_
17a	10%-facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circumstances test—20 organization meets the "facts-and-circumstances" and the organization meets the organization me	acts-and-circui	nstances" test,	check this box	and stop here.	Explain ın Par	rt IV how the
b 18	10%-facts-and-circumstances test – 2008 more, and if the organization meets the "forganization meets the facts-and-circumstand Private foundation. If the organization did	acts-and-circun inces" test. The	nstances" test, c organization qua	heck this box a difies as a public	and stop here. Bly supported or	Explain in Par ganization .	t IV how the

Part IV	(Form 990 or 990-EZ) 2009 Supplemental Information. Complete this part to provide the explanations required by Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See	Page 4 Part II, line 10; instructions.
	·	
·		

Part III

The primary purpose of RENEWANATION is to promote Christian education. In 2009, we:

- Worked with all the Christian schools in Roanoke VA to learn more of their needs and brought them together to work collectively to resolve needs, lower costs, expand enrollment, and better serve the community.
- We awarded Parkway Christian Academy, Roanoke, VA a grant for professional improvements, student scholarships, and campus expansion. The end result was a net increase of over 100 students.
- We visited or communicated with multiple schools in several states to help them work through problems or reach their goals.

Part V

Line 35: The amount of revenue received on line 7a was from fundraiser sales of books and vehicle decals that left a negative balance, as shown on line 7c.