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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

For ca	lendar year 2009, or tax year beginning		, and ending	,	
G C	neck all that apply $oxed{X}$ Initial return $oxed{\Box}$ Initi	al Return of a former p	ublic charity	Fin	al return
	Amended return	Address of	change Nam	e change	
Use	the		/	Employer identification nu	mber
IRS la Other			<u> </u>	<u>27-060</u> 1232	
pri)		Telephone number (see the	instructions)
or ty See Sp	pe.		<u> </u>	985-735-8078	
Instruc				If exemption application is	· -
Н (Check type of organization: X Section 501	(c)(3) exempt private f		1 Foreign organizations, che	
н ,	Section 4947(a)(1) nonexempt charitable to			2 Foreign organizations mee here and attach computation	
1 1		ounting method X Ca		E If private foundation status	
	// B / / / / / / /	Other (specify)		under section 507(b)(1)(A) F If the foundation is in a 60	′ <u> </u>
▶ :	· · · · · · · · · · · · · · · · · · ·	column (d) must be or	n cash basis)	under section 507(b)(1)(B)	
Part	Analysis of Revenue and	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in	expenses per books	income	income	for charitable
	columns (b), (c), and (d) may not neces- sarıly equal the amounts ın column (a)				purposes (cash basıs only)
	(see the instructions))				(casir basis orliy)
	1 Contributions, gifts, grants, etc, received (att sch)	5,188.	. 1		
	2 Ck X if the foundn is not req to att Sch B 3 Interest on savings and temporary		•		
	cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
_	b Net rental income or (loss)	` `	` *		
R E	6a Net gain/(loss) from sale of assets not on line 10. b Gross sales price for all				
^с т 2 УВ<п	assets on line 6a				
Ħ	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain				
∡ ī	9 Income modifications		*		
€E	10a Gross sales less returns and			-	
S)	allowances h Less Cost of				
AUG	goods sold				
₹	c Gross profit/(loss) (att sch)				
3	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	5,188.	0	0.	
	13 Compensation of officers, directors, trustees, etc	0.		' 	
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
A D M	16a Legal fees (attach schedule) See St 1	350.	350		350.
		1,685.	1,685	1,685.	1,685.
O P E R A T	1 COURT OF THE PROPERTY OF THE		 		
PS	18 Taxes (attach schedule)(see instr.)			-	
O P E R A T	18 Tipes (attach schedule) see instr) 19 act perfect attorn (attach Cook Pich) And Gregorian (attach Cook			- -	
N C	20 Cocupancy		· 		
	The state of the s		· · · · · · · · · · · · · · · · · · ·		
A E N X D P	23 Other expenses (attach schedule)			 	
É	See Statement 3	775.	775	5. 775.	775.
AND ENSES	24 Total operating and administrative				
Š	a	2,810.	2,810	2,810.	2,810.
	1 '- '- '	900.			900.
	26 Total expenses and disbursements. Add lines 24 and 25	3,710.	2,810	2,810.	3,710.
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	1 470			
	b Net investment income (if negative, enter -0-)	1,478.	<u> </u>	5.	
	C Adjusted net income (if negative, enter -0-)			0.	
BAA	For Privacy Act and Paperwork Reduction Ac	t Notice, see the instru	ictions. T	EEA0504L 02/02/10	Form 990-PF (2009)

Part	II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		(a) Face Manhat Value
			(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	_	Cash — non-interest	•		1,478.	
	2		ary cash investments	·		
	3	Accounts receivable	-			
		Less allowance for	doubtful accounts			
	4	Pledges receivable				
	_	Less allowance for	doubtful accounts		-	
	5	Grants receivable				
	6	Receivables due from office disqualified persons (attai	cers, directors, trustees, and other checkles checkles.			
	7	Other notes and loans rec				
A		Less: allowance for	`			,
S	8	Inventories for sale	or use			-
S E T	9	Prepaid expenses a				
S		•	and state government			
	١	b Investments — corporate	stock (attach schedule)			
		c Investments — corporate	bonds (attach schedule)			
	11	Investments – land, equipment basis.	buildings, and			
		Less. accumulated deprec (attach schedule)	iation •			
	12	Investments - mort	gage loans.			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and e	equipment. basis 🕒			
		Less accumulated deprec (attach schedule)	iation •			
		Other assets (descri	completed by all filers -	0.	1,478.	1,478.
L	17		o, see page 1, item I)	0.	1,4/0.	1,470.
1		• •	nd accrued expenses			}
A B	18 19					
- 1	20		tors, trustees, & other disqualified persons .			
Ļ	21	•	s payable (attach schedule)			
Ť	22	Other liabilities (descr				
E	2.4.	Other habilities (descr				
Š	23			0.	0.	
		Foundations that fo and complete lines	llow SFAS 117, check here 24 through 26 and lines 30 and 31.			
N F	24	Unrestricted				
N F U N	25	Temporarily restricted	ed			
D	26					
A BALA:		Foundations that do and complete lines	o not follow SFAS 117, check here X 27 through 31.			7
E L	27	Capital stock, trust p	orincipal, or current funds		1,478.	
SN	28		, or land, building, and equipment fund			
O E	29	- ·	ulated income, endowment, or other funds			
RS	30		fund balances (see the instructions)	0.	1,478.	
	31	Total liabilities and (see the instructions	net assets/fund balances	0.	1,478.	
Part			ges in Net Assets or Fund Balanc		2,71,01	<u> </u>
					area with	
'	ota end-	ii net assets or fund b of-year figure reporte	alances at beginning of year – Part II, colt d on prior year's return)	ama (a), ane 30 (must a	gree with 1	0.
		er amount from Part I,			2	1,478.
		increases not included in li			3	
		lines 1, 2, and 3			4	1,478.
		eases not included in line 2 ((itemize)		5	
			alances at end of year (line 4 minus line 5)) – Part II, column (b), I	ine 30 6	1,478.

Form 990-PF (2009) LILIES OF THE FIELD MINISTRIES, INC

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6 Enter 1% of net investment income (1% of Part I, line 27b)

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

6

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Form	990-PF (2009) LILIES OF THE FIELD MINISTRIES, INC 27-06	01232		F	age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the	instruc	tions)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here				
	Date of ruling or determination letter: (attach copy of letter if necessary - see instr.)				
t	Domestic foundations that meet the section 4940(e) requirements in Part V,	<u> </u>			0.
	check here ► and enter 1% of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
	foundations only Others enter -0-).	<u> </u>			0.
3	Add lines 1 and 2	<u>; </u>			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	<u> </u>			0.
6	Credits/Payments				
	a 2009 estimated tax pmts and 2008 overpayment credited to 2009				
	Exempt foreign organizations — tax withheld at source				
	Tax paid with application for extension of time to file (Form 8868)				1
	Backup withholding erroneously withheld . 6d	_	·		
7	Total credits and payments Add lines 6a through 6d				<u> </u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			-	
	Enter the amount of line 10 to be: Credited to 2010 estimated tax				
Par	t VII-A Statements Regarding Activities				
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1 a	Yes	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 b		<u>X</u>
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials publis or distributed by the foundation in connection with the activities	hed			
c	: Did the foundation file Form 1120-POL for this year?		1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
_	(1) On the foundation	0.			
-	foundation managers \Rightarrow \$ 0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
_	If 'Yes,' attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes				
			_3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	37	X /2
_	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
_	If 'Yes,' attach the statement required by General Instruction T				
0	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either. • By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that confl	ıot			
	with the state law remain in the governing instrument?	ici	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7		Х
8a	Enter the states to which the foundation reports or with which it is registered (see the instructions)				
	N/A				
b	o If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i>		8b	N	/A
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 49 for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV)?	42(j)(5) art XIV	9	X	
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name and addresses See Statement.5	es	10_	X	
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Par	t VII-A Statements Regarding Activities Continued				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	ore	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and ex	emption application?	13	X	
14	CTTUDE CONCUE	lephone no. ► 985-7	35-8	078	
		P + 4 ► 70427	<u> </u>	<u> </u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Chec	ck here	N/A		$\prod_{i=1}^{n}$
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15			N/A
Parl	t VII-B Statements Regarding Activities for Which Form 4720 May Be Requir	red			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
1 a	During the year did the foundation (either directly or indirectly):				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	∐Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes X No			
b	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions descr Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the iii	ibed in nstructions)?	1b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	▶ 🗌			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepte that were not corrected before the first day of the tax year beginning in 2009?	ed acts,	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	as a			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes X No			
	If 'Yes,' list the years ▶ 20 , 20 , 20 , 20				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section	on 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying sectionally years listed answer 'No' and attach statement, see the instructions.)	n 4942(a)(2) to	2b	N N	/A
	_all years listed, answer 'No' and attach statement — see the instructions) : If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the	vears here	20		
	► 20, 20, 20, 20	years nere.			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No			
ŀ	olf 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the four				
•	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or beque	approved			
	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C. Form 472)	est; or O, to			⁻
	détermine if the foundation had excess business holdings in 2009.)		3b	N	/A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
E	Did the foundation make any investment in a prior year (but after December 31, 1969) that cou	ld			
	jeopardize its charitable purpose that had not been removed from jeopardy before the first day the tax year beginning in 2009?		4b		X

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Part VII-B Statements Regarding Activit		n 4720 May Be Req	uired (continued)			1
 5a During the year did the foundation pay or incu (1) Carry on propaganda, or otherwise attempt 	-	on (section 4945(o))2	☐ Yes X	No		
(2) Influence the outcome of any specific pub	_		res _A	NO		
on, directly or indirectly, any voter registra	ation drive?	-	Yes X	No		
(3) Provide a grant to an individual for travel,		•	Yes X	No		
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, of 4940(d)(2)? (see instri	rganization described uctions)	Yes X	No		
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No		
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the excep ding disaster assistance	tions	-	5b l	N/A
Organizations relying on a current notice rega	rding disaster assistant	ce check here	▶ 🗀			
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure response of 'Yes,' attach the statement required by Regional Statement required by Regional Statement (Statement Regional Statement)	sibility for the grant?	•	N/A Yes	No		
		• •	_	ı		
6a Did the foundation, during the year, receive ar on a personal benefit contract?				No _	CI-	
b Did the foundation, during the year, pay premi	lums, airectly or indirec	ctiy, on a personal bene	iit contract?	-	6b	X
7a At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	iction? Yes X	No		
b If yes, did the foundation receive any proceed						A\V
Part VIII Information About Officers, Di and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	.mploy	ees,	
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).			
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		ense ac r allowar	
See Statement 6		-				
		0.	0.			0.
				,		
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1— see ir	nstructions). If none, e	nter 'NO	NE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp	ense ac r allowar	
None						
Total number of other employees paid over \$50,000)		•			0
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Form 990-PF (2009) LILIES OF THE FIELD MINISTRIES, INC Part VIII Information About Officers, Directors, Trustees, Fou and Contractors (continued)	27-060 Indation Managers, Highly Paid E	
3 Five highest-paid independent contractors for professional services — (senter 'NONE.'	ee instructions). If none,	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None	•	
Total number of others receiving over \$50,000 for professional services	>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ical information such as the number of	Expenses
1 SUPPORT OF CORRECTIONAL FACILITIES		
		500.
2 SUPPORT OF CHRISTIAN MINISTRIES		
3 SUPPORT OF FOOD BANK		200.
		100.
4 SUPPORT OF INDIVIDUALS IN NEED		
		100.
Part IX-B Summary of Program-Related Investments (see Instr	uctions)	
Describe the two largest program-related investments made by the foundation of N/A	turing the tax year on lines 1 and 2	Amount
2		
All other program-related investments. See instructions 3		
Total. Add lines 1 through 3	>	0.
DAA		Earm 000 DE (2000)

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Part X Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreign founda	tions,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities.	1 a	
b Average of monthly cash balances	1 b	2,137.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	2,137.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation) 1e 0	.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	2,137.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3		_
(for greater amount, see instructions)	4	32.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,105.
6 Minimum investment return. Enter 5% of line 5	6	105.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private ope	rating foundat	ions
and certain foreign organizations check here ► X and do not complete this p	art.)	
1 Minimum investment return from Part X, line 6 N/A	1	
2a Tax on investment income for 2009 from Part VI, line 5		
b income tax for 2009 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	
Part XII Qualifying Distributions (see instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes	* <u>*</u>	_
a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	3,710.
b Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	3,710.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,710.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see Inst	ructions)	N/A		
	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7	*		×	
2 Undistributed income, if any, as of the end of 2009:				
a Enter amount for 2008 only .				
b Total for prior years 20, 20, 20				
3 Excess distributions carryover, if any, to 2009.				
a From 2004				
b From 2005	1	· .		
c From 2006				
d From 2007		J.\$.	*	·
e From 2008			> % §	
f Total of lines 3a through e			â	
4 Qualifying distributions for 2009 from Part	\$%		. , , /	
XII, line 4 ► \$) (1)	
a Applied to 2008, but not more than line 2a				
	1137E 2 4	***		, ,
 Applied to undistributed income of prior years (Election required — see instructions) 				
 Treated as distributions out of corpus (Election required – see instructions) 				.
· · · · · · · · · · · · · · · · · · ·				. 4 × × × 1
d Applied to 2009 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the	* 35.4 A . S. A.			
same amount must be shown in column (a))		1		
			\$	
6 Enter the net total of each column as indicated below:		() ()		
	* * * * * * * * * * * * * * * * * * *	'`		*
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount — see instructions				
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount — see instructions				
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9.				
a Excess from 2005				
b Excess from 2006	1	***************************************		
c Excess from 2007	1			
d Excess from 2008	1			
e Excess from 2009	1			

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

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3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	substantial contributor	recipient						
a Paid during the year	substantial contributor	recipient						
Takal		<u> </u>	<u> </u>					
Total Total			► 3a					

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Part XVI-A Analysis of Income-Producing Activities

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Ente	or 'aross	s amounts unless otherwise indicated	Unrelate	ed business income	Evoluder	d by section 512, 513, or 514	
		ram service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
	_					·	(
			-				
	d						
	f						
	g Fees	and contracts from government agencies					
2	Memb	bership dues and assessments					
3	Interes	et on savings and temporary cash investments			1		
4	Divide	ends and interest from securities					,
5	Net re	ental income or (loss) from real estate					
	a Debt-	financed property					
	b Not d	ebt-financed property					
6	Net rer	ntal income or (loss) from personal property					
7	Other	r investment income					
8	Gain or	r (loss) from sales of assets other than inventory					
9	Net in	ncome or (loss) from special events.					
10	Gross	s profit or (loss) from sales of inventory					
11	Other	revenue		*		*	
,	a						
	ь			, <u>. </u>			
							
	е						· · · · · · · · · · · · · · · · · · ·
12	Subto	otal Add columns (b), (d), and (e)	·				
13	Total.	. Add line 12, columns (b), (d), and (e)				13	0.
13	Total.	. Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify ca	lculations)			13	0.
13 (See	Total. e works	sheet in the instructions for line 13 to verify ca		ishment of Exemp	t Purp		0.
13 (Sec	Total.e works	B Relationship of Activities to the	Accompl			oses	
13 (Sec	Total.e works	B Relationship of Activities to the	Accompl			oses	ly to the
13 (Sec	Total.e works It XVI-	sheet in the instructions for line 13 to verify ca	Accompl			oses	
13 (Sec	Total.e works	B Relationship of Activities to the	Accompl			oses	
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TEEA0502L 07/06/09

	descri		501(c) of the	e Code (o		elated to, one or n on 501(c)(3)) or in			zations	Yes X No
		(a) Name of or		criedule	(b) Typ	e of organization)	(c	Description (of relationship
N	/A				37.21			,	<u> </u>	•
_						·				
_										
_	Under nena	alties of periury. I dea	clare that I have	examined th	ıs return, ıncluding a	accompanying schedule	s and state	ements, and to the be	est of my knowledge	e and belief, it is true, correct, and
	complete [Declaration of prepar	er (other than ta	expayer or fid	uciary) is based on	all informátion of which	preparer l	has any knowledge	- D.	·, +
S	Signa	ature of officer or tru	stee		<u> </u>			12/10	Title	den
GN HER	Paid Pre-	Preparer's signature	MICHAPI	B. BU	RRIS, CPA		Date	·	Check if	Preparer's Identifying number (See Signature in the instrs) N/A
E	parer's Use	Firm's name (or	Michael	B. Bu	rris, CPA			1 1	EIN ► N/	A
	Only	yours if self- employed), address, and	242 Ala	bama A	ve 70427					(005) 700 050
		710	KOGALIIS	a I.A	/ II A / /				l nu	(005)732-2504

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Form **990-PF** (2009)

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Federal Statements

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LILIES OF THE FIELD MINISTRIES, INC

27-0601232

Statement 1 Form 990-PF, Part I, Line 16a **Legal Fees**

(a) Expens <u>Per Boo</u>		stment Ad	(c) justed <u>Income</u>	(d) Charita Purpos	
Total \$	350. 350. \$	350. \$ 350.	350. 350.	\$	350. 350.

Statement 2 Form 990-PF, Part I, Line 16b **Accounting Fees**

		(a) enses Books	Net stment come		(c) usted <u>Income</u>		(d) aritable <u>arposes</u>
Total	\$ \$	1,685. 1,685.	\$ 1,685. 1,685.	\$ \$	1,685. 1,685.	\$ \$	1,685. 1,685.

Statement 3 Form 990-PF, Part I, Line 23 Other Expenses

	(a)	(b) Net	(c)	(d)
	Expenses	Investment	Adjusted	Charitable
	per Books	Income	Net Income	<u>Purposes</u>
FILING FEES - SECRETARY OF STATE LICENSES, FEES, AND PERMITS Total	\$ 25. 750. \$ 775.	\$ 25. 750. \$ 775.	750.	\$ 25. 750. \$ 775.

Statement 4 Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants

Cash Grants and Allocations

Class of Activity:

Donee's Name:

Donee's Address:

FOOD BANK

BOGALUSA HELP CENTER, INC.

P.O. BOX 1425 BOGALUSA, LA 70429

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

NONE 501 (C) (3)

Class of Activity:

Donee's Name: Donee's Address:

BAPTIST CHARITY

BAPTIST CHILDREN'S VILLAGE 805 N FLAG CHAPEL ROAD

JACKSON, MS 39209

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

NONE 501 (C) (3)

100.

100.

\$

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Federal Statements

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LILIES OF THE FIELD MINISTRIES, INC

27-0601232

Statement 4 (continued) Form 990-PF, Part I, Line 25 **Contributions, Gifts, and Grants**

Class of Activity:

Donee's Name: Donee's Address:

Relationship of Donee:

Organizational Status of Donee: Amount Given:

Class of Activity: Donee's Name:

Donee's Address:

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

Donee's Name:

Donee's Address:

Class of Activity:

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

CHRISTIAN CHARITY

BROTHER'S KEEPER MISSIONS MINISTRIES

P.O. BOX 2574

GULFPORT, MS 39505

NONE

501 (C) (3)

CORRECTIONAL FACILITY
B.B. "SIXTY" RAYBURN CORRECTIONAL CENTER

27268 HIGHWAY 21 ANGIE, LA 70426

NONE

STATE OF LA FACILITY

500.

100.

100.

TWO INDIVIDUALS

NONE

900. Total 🕏

\$

Statement 5 Form 990-PF, Part VII-A, Line 10 **Substantial Contributors During the Tax Year**

Name of Substantial Contributor Address of Substantial Contributor

GLINDA G. AND WILLIAM P. CROOKS

15736 EPHRAIM THOMAS ROAD BOGALUSA, LA 70427

Statement 6 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours <u>Per Week Devoted</u>	Compen- sation		buti	ntri- lon to <u>& DC</u>	_	Expense Account/ Other
GLINDA G. CROOKS 15736 EPHRAIM THOMAS ROAD BOGALUSA, LA 70427	President O	\$ (0.	\$	0.	\$	0.

2009

Federal Statements

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LILIES OF THE FIELD MINISTRIES, INC

27-0601232

Statement 6 (continued)
Form 990-PF, Part VIII, Line 1
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours <u>Per Week Devoted</u>	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
WILLIAM P. CROOKS 15736 EPHRAIM THOMAS ROAD BOGALUSA, LA 70427	Secretary 0	\$ 0	. \$ 0.	\$ 0.
JOHN D. GRAHAM 8724 OLD HAMMOND HWY. BATON ROUGE, LA 70809	Director 0	0	. 0.	0.
DIANNE SMITH 302 SOUTH PINE STREET POPLARVILLE, MS 39470	Director 0	0	. 0.	0.
HILDA BROOME 3636 MANCHESTER ROAD MOSS POINT, MS 39562	Director 0	0	. 0.	0.
	Total	\$ 0	\$ 0.	\$ 0.

Form **8868** (Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev. 4-2009)

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 cannot 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 and click on e-file for Charities & Nonprofits Name of Exempt Organization Employer identification number Type or print LILIES OF THE FIELD MINISTRIES, INC 27-0601232 File by the due date for filing your return See Number, street, and room or suite number. If a P.O. box, see instructions 15376 EPHRAIM THOMAS ROAD instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions BOGALUSA, LA 70427 Check type of return to be filed (file a separate application for each return): Form 990 Form 990-T (corporation) Form 4720 Form 990-BL Form 990-T (section 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-T (trust other than above) Form 6069 X Form 990-PF Form 1041-A Form 8870 The books are in the care of ► GLINDA G. CROOKS Telephone No. ► 985-735-8078 FAX No ► 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 8/15 _ _ , 20 10 , to file the exempt organization return for the organization named above The extension is for the organization's return for X calendar year 20 09 or tax year beginning _____, 20 ___, and ending 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|\$ 0. 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 3Ы\$ 0. 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) 0. 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

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.