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201071 11/24/2010 11 42 AM

Department of the Treasury Internal Revenue Service

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)

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

2009 Open to Public

_	For the 20	09 calendar ve	ear, or tax year begin		24/09 ,ar		12/31/0		3	,,,,,,,,		Habecholi
<u>п</u> В	Check if applic		C Name of organization	ining 037	21/03 , ai	ig enumy .	12/31/0		,	D Emi	olovor idor	ntification number
Ē	Address chang	usa IRS	C Name of organization	Rice an	d Beans Mi	nistrias	,		- 1,) EIII]	Jioyer luei	illication number
<u> </u>	י ו	label or	Doing Business As	rzee an	u beams m		<u> </u>			27	-1004	1033
L	Name change	print or type.		P O hov if mail is no	t delivered to street adda	mee)		Room/su			phone num	
X	Initial return	See	1258 Ovet			(555)		ROOHVSU	ite E			5-4911
	Termination	Specific	City or town, state				_	L				29,281
F	Amended retu	Instruc- rn tions.	Ellisvill	• • •		39437			μ.	G Gross r	eceipts \$	29,201
	1	E Nome	and address of princip			59431			──.	1/a\ 1- 11		4
L	Application pe		ed Curry,								us a group ret	
			58 Ovette		Road					H(b) Are	iates? all affiliates	Yes X No
			lisville	MOSCITE	MS 3	9/37					uded?	Yes No
	Tax-exemp			◀ (insert no)	4947(a)(1) or					11 - 11	io, anach a il	st (see instructions)
<u>-</u>			ciceandbea				<i>/</i>			U/a) C		
ĸ		ization X Corp		Association	Other >			V		109	up exemption	
	Part I	Summar		Association	Other		15	Year of form	iauon 20	103	I IVI State	of legal domicite MS
-	· · · · · · · · · · · · · · · · · · ·		he organization's m	ission or most	significant activiti							
	1 7		ne Methodist				wilding	churc	h hui	ldin	70	
N 2 4 2011			ning mission						II Dui.	Tatn	y3,	
Š			iring mrooron	, brodraw	o and mini	Scering	co che p					
8	2 Che	eck this hoy	If the organiza	tion discontinu	ed its operations	or disposed o	of more than 3	E9/ of ito	not acco	.tc		
<u></u>	3 Nur		members of the go			or disposed o				3	15	
7	9 4 Nur		endent voting mem		•) RE	CEIV		4	15	
4	5 Tot		employees (Part V,		eming body (Fan	(VI, line ID)	1			771	0	
8 7	6 Tot			•			1=1 100	11 2	1011 l	0 5 0 6 0 7a		
JAN 2 4 2011		6 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, column (C), line 12									1 00	
7	1		siness taxable incor			IIIE 12	1	DEA1	117			0
\Box	D Net	umerated but	silless taxable ilicoi	ne nom rom	990-1, line 34		+ OG	DEN	Prior Year	7b		Current Year
SCANNED	, 8 Cor	ntributions and	d grants (Part VIII, I	ne 1h)			L					29,281
Z	9 Pro		revenue (Part VIII,								1	
	10 Inve		ne (Part VIII, colum		, and 7d)							
Ø	11 Oth		art VIII, column (A)			e)						
· · _			dd lines 8 through			•				•		29,281
			ar amounts paid (Pa									14,912
	1		or for members (Pai									
ų	1 4 1		ompensation, emplo			A), lines 5–10))					<u> </u>
90	16a Pro		Iraising fees (Part I				•					
, ,	b Tota	al fundraising	expenses (Part IX,	column (D), lin	e 25) >	Ţ	517					
ú	[]] 17 Oth	er expenses (Part IX, column (A)	, lines 11a-11d	d, 11f–24f)							4,680
	18 Tota	al expenses A	Add lines 13-17 (m	ust equal Part	IX, column (A), lir	ne 25)						19,592
_		enue less exp	oenses Subtract lin	e 18 from line	12							9,689
Net Assets or	Ses							Beginni	ng of Curre	nt Year		End of Year
sset	를 20 Tota	al assets (Par	•					<u> </u>				9,689
et A	일 21 Tota	al liabilities (P										
			d balances Subtra	ct line 21 from	line 20)]	<u>9,689</u>
_	Part II	Signatur										
		Under penalt	ies of perjupt, I declare is true, correct, and ca	that I have exan	nined this return, inc	luding accompa	inying schedule:	s and state	ements, and	d to the l	best of my k	:nowledge wledge
0				//	on or property (our	a anan omoor, io	, pasca on an in	o,,,,,d,,o,, c	or willion pro	1	ao any mio	go
	ign	🕨 🔫		<u> </u>								
п	ere	. · · /	e of officer	T		,	ъ.	1		Da	te	
			ed Curry,	Jr.			Presi	<u>.aent</u>				
_		y Type or	print name and title			_	1	Т			Drong	rer's identifying number
P	aid	Preparer's) () \wedge		PA		Date		Check if self-		— (see ⊪	nstructions)
	reparer's	signature		1	110		11/2	4/10	employed	d ▶		7-17-6975
	se Only	Firm's name	(or yours \ \ \rightarrow \Kin		PLLC					EIN	▶ 4	<u>3-2084825</u>
	· = ••••	if self-employ	•••	Box 118						Phon		F 4 4
		address, and			<u> 39465-1</u>					no	▶ 601	<u>-544-9795</u>
Ma	av the IRS o	liscuss this re	turn with the prepai	er shown abov	e? (see instruction	nns)						Yes No

DAA

Pa	ırt III	Statement of Program Serv	ice Accomplishments		
1	Briefly des	scribe the organization's mission	-		
A	ssist	the Methodist Chu	irch of Costa Rica in bu	ilding church bui	ldings,
е	stabl	ishing mission pro	grams and ministering to	the poor.	
		<i>⊒</i> t	, y=g	one poort	
					•
2	Did the or	ganization undertake any significant	program services during the year which were not	tisted on	
		orm 990 or 990-EZ?	program between during the your which were not	instea on	Yes X No
		escribe these new services on Sche	dula O		Tes VI NO
3					
3		gamzation cease conducting, or mai	ke significant changes in how it conducts, any pro	gram	
	services?		_		Yes X No
		escribe these changes on Schedule			
4			or each of the organization's three largest program		
	Section 50	01(c)(3) and 501(c)(4) organizations	and section 4947(a)(1) trusts are required to repo	ort the amount of grants and	
	allocations	s to others, the total expenses, and i	evenue, if any, for each program service reported	i	
			,		
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
				, ,	•
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4.5	(Codo	\ /F		\ (D)	
40	(Code) (Expenses \$	including grants of \$) (Revenue \$)
			•		
4d	Other prod	gram services (Describe in Schedul	e O)		
	(Expenses		uding grants of \$ 14,912) (F	Revenue \$	1
44		gram service expenses	18,387		
76	pro	our rice expenses P	10,001		Form 990 (2009)
					rorm ฮฮบ (2009)

P	art IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	_X_	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	i	Χ
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	3		Χ
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		Χ
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	5		
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,"	İ		
	complete Schedule D, Part I	6		Х
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	7		Χ
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8	1	Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	Ī		
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			1
	complete Schedule D, Part IV	9		Х
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	10		Х
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	11		Х
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			ĺ
	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			ĺ
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			ĺ
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			ĺ
	Did the organization report an amount for other assets related 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			ĺ
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			ĺ
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12		Χ
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			ĺ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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	14b		Х
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	15		Χ
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	16	Χ	
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	17		Х
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	18		X
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	19		_X_
20	Did the organization operate one or more hospitals? If "Yes." complete Schedule H	20		Х

Part IV **Checklist of Required Schedules (continued)** Yes No 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 Χ 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 Χ 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 Χ 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 Χ 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 Χ 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 X 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 Χ 27 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) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Χ 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes." complete Schedule L. Part IV Χ 28b An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Χ 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 Part I Χ 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II Χ 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Χ sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R. Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 III, IV, and V, line 1 34 Χ 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 Χ 35 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related Χ organization? If "Yes," complete Schedule R, Part V, line 2 36 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, 37 Χ 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

27-1004033

<u>r q</u>	Statements Regarding Other IKS Fillings and Tax Compliance		__		
			-	Yes	No
та	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			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable payments to vendors and reportable payments.	oortable	١. ا		
20	gaming (gambling) winnings to prize winners?	r i	1c		
za	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 0	┨		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return.	ns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)				
32	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d 5			
Ju	this return?	ы Бу	,_		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3a 3b		<u>^</u>
		authority	30		
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin				
	account)?	ariciai	4a		Х
b	If "Yes," enter the name of the foreign country				<u> </u>
_	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank			
	and Financial Accounts	Sam			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	·	<u>x</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega				
	Prohibited Tax Shelter Transaction?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	е			
	organization solicit any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or			
	gifts were not tax deductible?		6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	joods			
	and services provided to the payor?		7a		
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	S			
	required to file Form 8282?		7c		ļ
ď	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersonal			
	benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		
9	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	-y.		
8	required?		7h		_
0	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		İ
9	Sponsoring organizations maintaining donor advised funds.		-		
а	Did the organization make any taxable distributions under section 4966?		9a		Ī
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			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter		1		
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		1		1
	amounts due or received from them)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			

Form 990 (2009) Rice and Beans Ministries Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and Part VI 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 b Enter the number of voting members that are independent 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 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? Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a material diversion of the organization's assets? 5 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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a Each committee with authority to act on behalf of the governing body? 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Does the organization have local chapters, branches, or affiliates? 10a If "Yes," does the organization have written policies and procedures governing the activities of such chapters

_	199, 1999 the digamentation 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	X
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	Х
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		
	rise to conflicts?	12b	
С	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	Х
14	Does the organization have a written document retention and destruction policy?	14	Х
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?		
а	The organization's CEO, Executive Director, or top management official	15a	X
b	Other officers or key employees of the organization	15b	Х
	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	X
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	

17	List the states with which a copy of this Form 990 is required to be filed	► MS
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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 X Upon request

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

State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ Fred Curry 1258 Ovette - Moselle Road

39437 MS

Ellisville

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."

Check this box if the organization did not compensate any current officer, director, or trustee

- 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

(A) Name and Title	(B) (C) Average Position (check all that apply) hours per week Q T T Q T Q T T Q T T Q T Q T T Q T Q T T Q T							(D) Reportable compensation	(E) Reportable	(F) Estimated amount of		
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations		
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·												
DAA										Form 990 (2009)		

Form 990 (2009) Rice and Beans Ministries Part VII -Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (C) (D) (F) (E) Name and Title Average Position (check all that apply) Reportable Estimated Reportable hours per compensation compensation amount of Officer Individual trustee or director Key employee Highest compensated employee Former week Institutional trustee from from related other the compensation organizations organization (W-2/1099-MISC) from the (W-2/1099-MISC) organization and related organizations 1b Total \blacktriangleright Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶ 0 Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 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 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 Section B. Independent Contractors 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 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization DAA Form 990 (2009)

Pa	rt V	III Statement of Reve	nue						
						(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
SS	40	Fodorated compages	4.				revenue		512, 513, or 514
Program Service Revenue Contributions, gifts, grants	14	Federated campaigns	1a	_					
ge	D	Membership dues	1b						
fts, rar	С	Fundraising events	1c						
igi	d	Related organizations	1d						
ns, iii	е	Government grants (contributions)	1e						
itio er s	f	All other contributions, gifts, grants,							
ğţ		and similar amounts not included above	1f		29,281				
dir	a	Noncash contributions included in lines 1a-	1f 9	8					
သို့	h	Total. Add lines 1a–1f			. . 1	29,281			
a	- "	Total. Add lines 1a-11			Duan Cada	27,201			
ž	_				Busn. Code				
ě	2a				<u> </u>		·		
e R	b			ì	 				
Ş	С								
Sel	d								
аш	е								
g	f	All other program service reve	nue						
ڇ	a	Total. Add lines 2a-2f		•	•		0 111		
	3	Investment income (including	dıviden	ds intere	st and				
		other similar amounts)		40, 1111010	o., u.,u ⊾				
	4	Income from investment of tax	. ovom	ot bond no				 	
			-exemp	ot bolla pi	oceeus P				
	5	Royalties	r		<u> </u>				
	_	(i) Real		(II) Po	ersonal				
	6a	Gross Rents							
	b	Less rental exps							
	C	Rental inc or (loss)							
	_d				▶ }				
	7a	7a Gross amount from			Other				
		other than inventory							
	b	Less cost or other							
	-	basis & sales exps							
	_	Gain or (loss)							
									
	d	Net gain or (loss)	. г						
nue	ва	Gross income from fundraising ever	nts						
en		(not including \$							
₹ev		of contributions reported on line 1c)			ļ				
er F		See Part IV, line 18	a						
Other Reve	b	Less direct expenses	ьĹ						
٥	C	Net income or (loss) from fund	raising	events					
		Gross income from gaming activitie							
		See Part IV, line 19	a						
	ь	Less direct expenses	ь	·					
		Net income or (loss) from gam							
		Gross sales of inventory, less	انام ودا	IVILICS		-			
	iva	returns and allowances	_						
			a l						
		Less cost of goods sold	рГ						
	<u>c</u>	Net income or (loss) from sale				·			
		Miscellaneous Revenue			Busn. Code				
	11a			Į					
	b			[
	С			ſ					
ŀ	d	All other revenue							
		Total. Add lines 11a-11d		,					
	12	Total Revenue. See instruction	ns			29,281	0	0	^
		Total Iveacura, See manuchon	13			23,201		<u> </u>	000

Part IX

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).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	·	expenses	general expenses	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	<u>.</u>			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	14,912	14,912		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	-	· ·	·	
11	Fees for services (non-employees)			·	
	Management				
b	Legal				
	Accounting				
d	Lobbying		•		
e	Professional fundraising services See Part IV, line 17	** , ,			
f	Investment management fees				
g	Other	··· · · · · · · · · · · · · · · · · ·			
12	Advertising and promotion	· · ·			
13	Office expenses	688		688	
14	Information technology	900			
15	Royalties				
16	Occupancy				
17	Travel	3,992	3,475	·· ····	517
18	Payments of travel or entertainment expenses		<u> </u>	· 	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
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)				
а	,				· · · · · · · · · · · · · · · · · · ·
b					
c					
d					
e					
_	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	19,592	18,387	688	517
26	Joint costs. Check here		10,507		517
	SOP 98-2 Complete this line only if the	ļ			
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation	İ			
24.4					

			(A)		(B)			
			Beginning of year		End of year			
1	Cash—non-interest bearing			1 1	9,689			
2	Savings and temporary cash investments			2 -				
3	Pledges and grants receivable, net	3						
4	Accounts receivable, net			4				
5	Receivables from current and former officers, directors,							
1	employees, and highest compensated employees. Com	es, and highest compensated employees. Complete Part II of						
	Schedule L			5				
6	Receivables from other disqualified persons (as defined							
	4958(f)(1)) and persons described in section 4958(c)(3)((B) Complete						
رم س	Part II of Schedule L			6				
ਰੂ 7	Notes and loans receivable, net			7				
Assets 8 8	Inventories for sale or use			8				
9 ۹	Prepaid expenses and deferred charges			9				
10	a Land, buildings, and equipment cost or							
	other basis Complete Part VI of Schedule D	10a						
1	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	· ·	14						
15		15						
16		4)	C		9,689			
17				17				
18				18				
19	Deferred revenue			19				
20	Tax-exempt bond liabilities			20				
g 21	•	of Schedule D		21				
₩ 22								
Liabilities 51	employees, highest compensated employees, and disqu	· •						
<u>.</u>	persons Complete Part II of Schedule L	zumiou		22				
_ 23		d narties		23				
24	, , , , , , , , , , , , , , , , , , , ,	•		24				
25	Other liabilities Complete Part X of Schedule D	artics		25				
26	Total liabilities. Add lines 17 through 25			26				
	Organizations that follow SFAS 117, check here ▶ X	and		20				
Balances 27 28	complete lines 27 through 29, and lines 33 and 34.	and						
	Unrestricted net assets			27	9,689			
				 	J, 00 J			
면 29 29	• •			28				
Pung 29	•	> []		29	· · · · · · · · · · · · · · · · · · ·			
ᆫ	Organizations that do not follow SFAS 117, check he	re 🚩 📋						
5 30	and complete lines 30 through 34.							
S 30	, , , , , , , , , , , , , , , , , , , ,			30				
98 31	Paid-in or capital surplus, or land, building, or equipmen			31				
Net Assets	3-,	r other funds		32	0 (00			
호 ³³	Total net assets or fund balances				9,689			
Z 34	Total liabilities and net assets/fund balances		C	34	9,689			

Form **990** (2009)

Form	990 (2009) Rice and Beans Ministries 27-1	004033		Pag	ge 12
	rt XI Financial Statements and Reporting				
		_		Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other	·r			
	if the organization changed its method of accounting from a prior year or checked "Other," expla	ın ın			
	Schedule O		i	į	
2a	Were the organization's financial statements compiled or reviewed by an independent accounta	nt?	2a		Χ
b	Were the organization's financial statements audited by an independent accountant?		2b		_X
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 acc	ountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year,	explain in			
	Schedule O				į
đ	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the y	ear were			į
	issued on a consolidated basis, separate basis, or both				į
	Separate basis Consolidated basis Both consolidated and separate basis				ļ
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth in			
	the Single Audit Act and OMB Circular A-133?	<u> </u>	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not unit	lergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo su	ch audits	3h		

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Rice and Beans Ministries

Employer identification number 27-1004033

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) 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3 % 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 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III-Functionally integrated Type II d Type III-Other 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) 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 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) Yes No and (III) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (I) Name of supported (ii) EIN (III) Type of organization (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of organization rganization in col the organization in (described on lines 1-9 in col (i) listed in your support col (I) of your (I) organized in the above or IRC section governing document? support? (see instructions)) Yes Yes No Nο Yes Nο

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 Rice and Beans Ministries

Rart III Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you che	ecked the box	on line 9 of Pa	art I.)			
	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received			-			
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
_	amount on line 13 for the year	ļ. ,					
С 8	Add lines 7a and 7b		-, , , , , , , , , , , , , , , , , , ,				
	Public support (Subtract line 7c from line 6)						
	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975					_	
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						·
14	and 12)				<u> </u>		
14	First five years. If the Form 990 is for the organization, check this box and stop here		t, second, third, for	uπn, or fifth tax ye	ar as a section 501	(C)(3)	▶ □
Sec	tion C. Computation of Public Su		tage	<u>-</u>			
15	Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))						
16	Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) Public support percentage from 2008 Schedule A, Part III, line 15 16						%
	tion D. Computation of Investme			· · · · · · · · · · · · · · · · · · ·			
17	Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 %						
18	Investment income percentage from 2008 Schedule A, Part III, line 17						
19a	33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line						
b	17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization						
	33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and						
	line 18 is not more than 33 1/3 %, check th		-	-			▶
20	Private foundation. If the organization did	I not check a box o	on line 14, 19a or	19h, check this bo	x and see instructi	ons	▶

Page 4

Schedule A (Form 990 or 990-EZ) 2009 Rice and Beans Ministries 27-1004033

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

Part I

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

"Yes" to Form 990, Part IV, line 14b.

Employer identification number

Rice and Beans Ministries 27-1004033

General Information on Activities Outside the United States. Complete if the organization answered

For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award Yes No the grants or assistance? 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.) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total offices in the employees or expenditures for region (by type) (i e, a program service, region agents in fundraising, program services, describe specific type of region region grants to recipients located in service(s) in region the region) **Totals**

Page 2 appraisal, other) (ı) Method of (book, FMV, 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 ▶ □ valuation (h) Description of non-cash assistance 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 (g) Amount of non-cash assistance (f) Manner of cash disbursement 27-1004033 (e) Amount of cash grant (d) Purpose of Use Schedule F-1 (Form 990) if additional space is needed. grant Rice and Beans Ministries (c) Region (b) IRS code section and EIN (if applicable) Schedule F (Form 990) 2009 (a) Name of organization Part III

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

Schedule F (Form 990) 2009

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Schedule F (Form 990) 2009

Page 3

27-1004033

Rice and Beans Ministries

Schedule F (Form 990) 2009 (book, FMV, appraisal, other) (h) Method of valuation Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16 (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement 14,912 (d) Amount of cash grant Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of recipients Costa Rica (b) Region (a) Type of grant or assistance Church construction Part III

27-1004033

Page 4

Part IV Supplemental Information

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

SCHEDULE O

Supplemental Information to Form 990

▶ Attach to Form 990.

(Form 990)

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Rice and Beans Ministries

Employer identification number 27-1004033

Form 990, Part III, Line 4d - All Other Achievements
Assisted Methodist Church in Costa Rica in building a church and
establishing a mission program

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Documents available upon request.