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SCANNED MAY 2 1 2010

Form **990**

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)

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Α	For th	e 2009 ca	alendar	year, or tax year beginning		, 2009, and e	ending		20	
В	Check if a	applicable	Please	C Name of organization The F	oundation of the Gre	eat Lakes C	onference, Chi	D Employer	identification n	umber
		change	use IRS	Doing Business As			71.2	31	161074	3
_			label or print or	Number and street (or P O box if	mail is not delivered to street ac	idress) Ro	om/suite	E Telephone		
	Name cl	-	type.	700 E. Melrose Avenue		,		(419)	425-960	2
	Initial ret	turn	See Specific		and 7ID + 4			1 413 /	<u> </u>	
П.	Terminat	ted	Instruc- tions.	Findlay, OH 45840	, and zir + 4			1		
닏.	Amende	d return		<u> </u>		_		G Gross receip		78,441
	Applicatio	n pending		me and address of principal office	r C. Darrell Prichar	ď	H(a) Is th	s a group return for a	affiliates? Yes	☑No
			Same	address as above			H(b) Are	all affiliates inclu	uded? Tyes	□No
1	Tax-exe	empt status		501(c) (3)◀ (insert no) 🔲 4	1947(a)(1) or		lf "I	No," attach a list	(see instruction	ns)
J	Websi	te: ► ww	w.fou	ndationglc.org			H(c) Group	exemption number	· •	
K	Form of	organization	Corp	poration Trust Association	Other ▶	L Year of f	ormation 1998	M State of leg	al domicile Oh	Н
Pa	art I	Summ	ary							
Governance] -	Briefly de purpose agencies	s of Th	the organization's mission the Great Lakes Conferen	n or most significant ce, Churches of God	activities. T , General C	o provide fund onference and	s for the vari	ous religion churches a	nd
Ĕ	.			***************************************					·	
Š	2 (Check this	box ►	If the organization discontinu	ed its operations or dispos	ed of more tha	n 25% of its net ass	sets		
<u>ن</u>	3	Number	of votir	ng members of the govern	ing body (Part VI. line	e 1a)		3		7
Activities &	1			ependent voting members		•	ne 1h)	4	•	6
ŧ	1			f employees (Part V, line 2			<u> </u>	5		3
ŧ	1					IVED .	1	. 6		6
⋖				f volunteers (estimate if ne		(6)	SS	7a		0
	/a	Total gro	ss unre	elated business revenue frousiness taxable income fro	om i κa nt VIII, column 	(C), line 121 542010	∞	. 7b		0
	D	iver unite	aleu D	dalifiess taxable income in		947.030 · 	O Prior Y		Current Yea	
	_				Ш	!	<u>≝</u> {	eai eai	- Ourient ree	-
ā	1	Contribut		·						
Revenue	1	Program			(40, 400)	10:	7.040\			
ě	10	Investme	nt inco	ome (Part VIII, column (A),	lines 3, 4, and 7d)			(12,430)	(9	7,340)
_				(Part VIII, column (A), lines						
	12	Total reve	enue — a	add lines 8 through 11 (mus	t equal Part VIII, colum	ın (A), lıne 12)	(12,430)		<u>7,340)</u>
	13	Grants a	nd sımı	ılar amounts paid (Part IX,	column (A), lines 1-3	3)		135,866	50	08,259
		Benefits								
ses	1))	31,254	26,85				
Expenses	1			ompensation, employee ber idraising fees (Part IX, colui	"					
쫎	1			g expenses (Part IX, column		•		* 3	*	W
	1		_					36,320	3	30,701
				s (Part IX, column (A), lines		· · ·	•	203,440		55,812
				. Add lines 13-17 (must en		(A), line 25)	·	215,870)		3,152)
	19	nevenue	1622 GX	penses. Subtract line 18 fro	mme 12		Beginning of (End of Yea	
ets or										
sse	20			art X, line 16)			•	5,682,634		72,205
Net Asse Fund Bal	21			(Part X, line 26)		•		,093,487		18,727
				und balances. Subtract lin	e 21 from line 20.		4	,589,147	5,35	53,478
22	art II			Block						
Siç He	_	and belie	ef, it is tru	of perjury, I declare that I have example, correct, and complete. Declare the stop hand officer The stop hand officer The stop hand officer	ation of preparer (other tha	n officer) is bas	ed on all information	of which prepa	e best of my knorer has any kno	iowledge iwledge
	🗸	R	OBER	TE. STEPHENSO	N - FINANC	CIAL C	DNTRO 1/6	R		
				name and title						
		 	<u> </u>	The results and		Date	Check if	Preparer's ident	tifung number	
		Preparer				Date	self-	(see instructions		
Pai	d	signature	. 7				employed ► L	'		
Pre	parer's	<u> </u>								
	Only	Firm's na		/ours			EIN	<u> </u>		
		address,		+ 4			Phone	no ► ()	<u></u>	
Ma	y the	IRS disc	uss this	s return with the preparer	shown above? (see i	nstructions)	· · ·		✓ Yes	No
For	r Priva	cy Act an	d Pape	rwork Reduction Act Notice	e, see the separate ins	tructions.	Cat. No	1282Y	Form 99 0) (2009)

Par	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: Support the various ministries of The Great Lakes Conference, Churches of God, General Conference and its member
	churches and agencies through the issuance of grants from investment income.
2	Did the organization undertake any significant program services during the year which were not listed on
~	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
_	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4-	(Code: \(\sigma_{\text{Currence}}\) \(\sigma_
4a	(Code:) (Expenses \$ 200,000 including grants of \$ 200,000) (Revenue \$) Grant to Mt. Tabor Church of God (member church) for the purpose of building a multi-purpose building.
4b	(Code:) (Expenses \$ 50,507 including grants of \$ 50,507) (Revenue \$)
	Grant to The Great Lakes Conference, Churches of God, General Conference Commission on Church Planting for the partial funding of a church planting field director staff person.
40	(Code.) (Expenses \$ 43,291 including grants of \$ 43,291) (Revenue \$)
70	Grant to The Great Lakes Conference, Churches of God, General Conference Commission on Church Planting for the
	purpose of starting new churches.
	Other program services. (Describe in Schedule O.) (Expenses \$ 214,461 including grants of \$ 214,461) (Revenue \$)
4-	Total program service expenses ► 508,259

Par	t 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	•	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		~
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		,
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		v
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," complete Schedule D, Part I	6		<i>,</i>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II .	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		~
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	v	
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	v	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	v	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	3		
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	≹		
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	* *		
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X	A	*	
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	7	**
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	Á -		, ;
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<i>y</i>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
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		,
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		,
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		,
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		,
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		•
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		v
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	<u> </u>	

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Pai	t IV	Checklist of Required Schedules (continued)			
				Yes	No
21		organization report more than \$5,000 of grants and other assistance to governments and organizations nited States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21	,	
22		organization report more than \$5,000 of grants and other assistance to individuals in the States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		,
23	organiza	organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the ation's current and former officers, directors, trustees, key employees, and highest compensated see? If "Yes," complete Schedule J	23)
24a	\$100,00	organization have a tax-exempt bond issue with an outstanding principal amount of more than 0 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines ough 24d and complete Schedule K. If "No," go to line 25.	24a		V
b	Did the	organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С		organization maintain an escrow account other than a refunding escrow at any time during the year ase any tax-exempt bonds?	24c		
d		organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a		501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction lisqualified person during the year? If "Yes," complete Schedule L, Part I	25a		,
b	prior ye	rganization aware that it engaged in an excess benefit transaction with a disqualified person in a ar, and that the transaction has not been reported on any of the organization's prior Forms 990 or ? If "Yes," complete Schedule L, Part I	25b		
26	Was a l	oan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	26		V
27	Did the substan	ed person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II organization provide a grant or other assistance to an officer, director, trustee, key employee, tial contributor, or a grant selection committee member, or to a person related to such an individual? 'complete Schedule L, Part III	27		•
28		e organization a party to a business transaction with one of the following parties (see Schedule L, instructions for applicable filing thresholds, conditions, and exceptions):			
а		nt or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family	member of a current or former officer, director, trustee, or key employee? If "Yes," complete le L, Part IV	28b		,
С		y of which a current or former officer, director, trustee, or key employee of the organization (or a nember) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,	28c		٧
29	Did the	organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		٧
30		organization receive contributions of art, historical treasures, or other similar assets, or qualified ation contributions? If "Yes," complete Schedule M	30		,
31	Did the Part I.	organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	31		
32	Did the	organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete le N, Part II	32		,
33	Did the	organization own 100% of an entity disregarded as separate from the organization under Regulations 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		/
34	Was the	e organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, and V, line 1	34	,	
35	Is any r	elated organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete le R, Part V, line 2	35		,
36	Section	501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related ation? 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 it is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
38	Did the	organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and te. All Form 990 filers are required to complete Schedule O	37	_	

The Enter the number reported in Box 3 of Form 1095, Annual Summary and Transmittal of U.S. Information Returns Enter 40- if not applicable	Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
U.S. Information Returns Enter -0- if not applicable				Yes	No
U.S. Information Returns Enter -0- if not applicable	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 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? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? by If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 3b 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. 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c Des the organization are annual gross receipts that are normally greater than \$100,000, and did the organization shall any exemption that it was or is a party to a prohibited tax shelter transaction and the organization shall are received deductible contributions under section 170(c). 5c Did the organization shall receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided t		U.S. Information Returns Enter -0- if not applicable			
gaming (gambing) wnnings to prize winners? 2 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 3 Statements, filed for the calendar year ending with or within the year covered by this return 4 If a least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2 a is greater than 250, you may be required to e-file this return. (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 4 If Yes,** has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4 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 Membership Membersh	b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . 1b -0-			
Statements, filed for the calendar year ending with or within the year covered by this return 2 b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 1b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0. 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0. 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0. 3c If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0. 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0. 3c If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0. 3c If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0. 3c If "Yes," the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. 3c If "Yes," the instructions of presentant and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. 3c If "Yes," did the organization a party to a prohibited tax shelter transaction? 3c If "Yes," did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 3c If "Yes," did the organization in that were not tax deductible? 3c If "Yes," did the organization in that were not tax deductible? 3c If "Yes," did the organization in the year year year year year year year yea	С		1c	1	
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0. 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country [such as a bank account, securities account, or other financial accounts. 5b If "Yes," enter the name of the foreign country No. See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. 5c Was the organization a party to a prohibited tax shelter transaction and Financial Accounts. 5c Was the organization a party to a prohibited tax shelter transaction and Financial Accounts. 5d Was the organization a party to a prohibited tax shelter transaction and Financial Accounts. 5d Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 5d Dest the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7d Organizations that may receive deductible contributions under section 170(c). 8d If "Yes," indicate the number of Forms 8282 filed during the year 9 If "Yes," indicate the number of Forms 8282 filed during the year 1 If "Yes," indicate the number of Forms 8282 filed during the year 1 If "Yes," indicate the number of Forms 8282 filed during the year 1 If "Yes," indicate the number of Forms 8282 filed during the year? 9 Sponsoring organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?	2a				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country level as a bank account, securities account, or other financial accounts. 5b If "Yes," enter the name of the foreign country level as a bank account, securities account, or other financial accounts. 5a Was the organization a party to a prohibited tax shelter transaction and financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6f "Yes" to line 5a or 5b, did the organization file Form 8866-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8262? 6c If "Yes," indicate the number of Forms 8282 filed during the year 6c Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 6c Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contributions of qualified intellectual property, did the organization file Form 8899 as required		Charlettes, filed for the calcindar year charing war or within the year covered by this retain			
a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0. 3 a ✓ 3 b ✓	b	•	20		
this return? bif "Yes," yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If "Yes," enter the name of the foreign country \(\) See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts? 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file a Form 1098-C as required? 7 Did the organizations maintaining donor advised funds and section 500(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization. Since the supporting organization organization and any time during the year? 9 Sponsoring organizations maintaining donor advised funds and section 500(a)(3) supporting organizations. Did the supporti		instructions)			
A At any time during the calendar year, did the organization have an interest in, or a signature or other authonty over, a financial account in a foreign country (such as a bank account, securities account, or other financial account?? b If "Yes," enter the name of the foreign country \(\) See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts? 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6c Poes the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 Dried the organization and make any taxabile and the organization file a Form 1098-C as required? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised funds. D did the organization make any taxabile distributions under section 4966? D of the organization make any taxabile d		this return?		-	7
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amounts due or received from them.)		dross income from members of shareholders	1		
a varie 300 or recorded from them.)	Ø				
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b		Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		

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

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		-
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		•
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		1
6	Does the organization have members or stockholders?	6		1
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		/
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	•	
b	Each committee with authority to act on behalf of the governing body?	8b	~	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		1
	tion B. Policies (This Section B requests information about policies not required by the Inte-	ernal		
Rev	enue Code.)			,
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		-
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	~	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
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	•	
14	Does the organization have a written document retention and destruction policy?	14	-	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	<i>y</i>	<u> </u>
b	Other officers or key employees of the organization	15b	-	-
40	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	40-		,
	with a taxable entity during the year?	16a		-
Ь	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	-	_
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c	.)/3)~	onka	
	available for public inspection. Indicate how you make these available. Check all that apply.	1012	orny)	
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	aract	
	policy, and financial statements available to the public.	or mile	JI 621	
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rde o	f the	
	organization: ► Robert E. Stephenson 700 E. Melrose Ave. Findlay, OH 45840 419-424-1961	. 45 0	.	

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order, individual trustees or directors; institutional trustees; officers, key employees; highest compensated employees, and former such persons.

Check this box if the organization did not co	1	any o	curre			cer, d	irec			
(A)	(B)	(C) Position (check all that apply)						(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
C. Darrell Prichard President	18.5	,		V				-0-	-0-	15,000
Douglas E. Nolt Chairman	0.3	~		/				-0-	-0-	-0-
Robert A. Fry Vice-Chairman / Chairman	0.3	,		~				-0-	-0-	-0-
Tim D. Clutter Secretary	0.3	~		~				-0-	-0-	-0-
Daniel N. Kennard Treasurer	0.3	,		~				-0-	-0-	-0-
Chester L. Stephenson Board Director	0.3	~						-0-	-0-	-0-
Kerry D. Samples Board Director	0.3	~						-0-	-0-	-0-
Robert E. Stephenson Financial Controller	4.25			~				4,000	-0-	-0-
	-									

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employee						d Employees	(contini	Jed)					
	(A) Name and title	(B) Average		,	•	C)			(D)	(E)		(F)	
			Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensatic from relate organization (W-2/1099-MI	on d ns co ISC)	Estimat amount other ompensa from th organiza and rela organizat	of ation ne tion ted
1b	Total	<u> </u>						•					
2	Total number of individuals (including but i reportable compensation from the organization)		to th	ose	list	ed a	above	e) w	ho received m	ore than \$10	00,000 ır		
3	Did the organization list any former office employee on line 1a? If "Yes," complete S							oye 	e, or highest o	compensated	d 3	Yes	No
4	For any individual listed on line 1a, is the sthe organization and related organizations individual.		an \$15	50,0	0003	? If '			mplete Schedu				,
5	Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," com	comi	oen	satı	on ·	from	anv	unrelated ord	anization fo	r _ 5		,
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest compensation from the organization.	ompensate	ed ind	epe	ende	ent (contra	acto	rs that receive	d more than	\$100,0	00 of	
	(A) Name and business add	fress							(B) Description of s	ervices	Com	(C) pensatio	n
								-					
_								+					
2	Total number of independent contractors (i					to	those	lıst	ed above) who	received			· · · · · · · · · · · · · · · · · · ·
	more than \$100,000 in compensation from												

Par	XVIII	Statement of Revenue				
, ,	<i>y</i>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues	-0-			To the Same and Same
Program Service Revenue	2a b c d e f	All other program service revenue . Total. Add lines 2a–2f	-0-	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	\$
	3 4 5	Investment income (including dividends, interest, and other similar amounts)	180,676	180,676	· * * * * * *	*
	b	Gross Rents		The state of the s		The Special State of the Speci
	7a	Gross amount from sales of assets other than inventory (i) Securities (ii) Other 2,197,765	* * * * * * * * * * * * * * * * * * * *			
	С	Less cost or other basis and sales expenses . Gain or (loss)	(278,016)	(278,016)		
Other Revenue	b	Gross income from fundraising events (not including \$	* * * * * * * * * * * * * * * * * * *	The state of the s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	9a	Gross income from gaming activities See Part IV, line 19	* * * * * *			
	С	Less: direct expenses, b Net income or (loss) from gaming activities	-0-	* 1 * 1 * 1 * 1 * 1 * 1 * 1 * 1 * 1 * 1		* * * * *
	b	Gross sales of inventory, less returns and allowances a Less: cost of goods sold b Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code	-0-			
	11a b c		* * * * * * * * * * * * * * * * * * * *		N	
	!	All other revenue	-0- (97,340)		, , , , , , , , , , , , , , , , , , ,	***************************************

Part IX Statement of Functional Expenses

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

	All other organizations must complete colu	ımn (A) but are not	required to comp	lete columns (B), (C	C), and (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	508,259	508,259		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
5	Compensation of current officers, directors, trustees, and key employees	15,000		15,000	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	10,930		10,930	
8	Other salaries and wages				
9	Other employee benefits	86		86	
10	Payroll taxes	836		836	
11	Fees for services (non-employees)				
	Management	+			
b	Legal	0.40=			
С	Accounting	3,185		3,185	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17			£2	
	Investment management fees	14,971		14,971	
	Other				
12	Advertising and promotion				
13		2,539		2,539	
	Office expenses	423		423	
14	Information technology			720	
15	Royalties	6,149		6,149	
16	Occupancy	1,422			
17	Travel	1,422		1,422	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	108		108	
23	Insurance	1,654		1,654	
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	Dues & Memberships	250		250	
b					
c					- " '
d					
	["				
e	All other expenses				
f 25	All other expenses	565,812	508,259	57,553	
26	Joint costs. Check here ▶ ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X **Balance Sheet** (A) Beginning of year End of year Cash-non-interest-bearing 275,678 149,483 2 2 Savings and temporary cash investments. 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 6 105,072 40,072 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges , Land, buildings, and equipment. cost or 10a 9,665 other basis Complete Part VI of Schedule D 298 190 Less accumulated depreciation 5,279,530 11 6.069.684 Investments - publicly traded securities . 11 12 Investments-other securities. See Part IV, line 11 12 13 13 Investments—program-related. See Part IV, line 11 14 14 22,056 12,776 15 Other assets. See Part IV, line 11 15 5,682,634 6,272,205 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 963 17 756 17 Accounts payable and accrued expenses , . . 127,000 111,298 18 18 Grants payable 19 19 Deferred revenue . . . 20 20 Tax-exempt bond liabilities 965,524 21 806,673 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . 22 23 23 Secured mortgages and notes payable to unrelated third parties . 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities. Complete Part X of Schedule D 25 25 26 Total liabilities. Add lines 17 through 25 . . . 1,093,487 918,727 26 Organizations that follow SFAS 117, check here ▶ □ and Balances complete lines 27 through 29, and lines 33 and 34. 4,589,147 27 5,353,478 27 Unrestricted net assets 28 28 Temporarily restricted net assets. . . Fund 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ ō and complete lines 30 through 34. Assets 30 Capital stock or trust principal, or current funds . . . 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 Retained earnings, endowment, accumulated income, or other funds 32 Net 5,353,478 4,589,147 33 33 Total liabilities and net assets/fund balances 5,682,634 34 6,272,205

Pa	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		~
b	Were the organization's financial statements audited by an independent accountant?	2b	~	
С				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	•	
	If the organization changed either its oversight process or selection process during the tax year, explain in	1		
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	За		~
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Form **990** (2009)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Inspection Employer identification number

The	Fοι	ındation of th	ne Great Lakes	Conference, Church	es of Go	d, Gener	al Confe	rence	31 ;	1	610743
Pa	rt I	Reason	for Public Ch	arity Status (All or	ganizatio	ons mus	t comple	ete this	part.) Se	e instruc	ctions.
The	ora	anization is no	ot a private four	dation because it is:	(For lines	1 through	h 11, ch	eck only	one box.)	
1	, 		•	rches, or association	•	_		_			
2	\exists			on 170(b)(1)(A)(ii). (Att					()()(-	7(-)-	
3	\Box			nospital service organ			ın sectio	n 170(b)	/1\/ Δ\/iii \		
4		· · ·	•	ition operated in conj						170/6\/1	MAMiii) Enter the
4	ш		me, city, and st	•							And the
_		•	•								Lunit desembed in
5	_	section 170	(b)(1)(A)(iv). (Co								runit described in
6			_	ernment or governme							
7				/ receives a substantia (1) (A)(vi). (Complete F		its suppo	rt from a	governm	iental uni	t or from t	the general public
8				in section 170(b)(1)		omplete	Part II.)				
9				receives: (1) more that				n contrib	utions, m	embershi	p fees, and gross
				ed to its exempt funct							
		support from	n gross investm	ent income and unre	lated bus	siness tax	kable inc	ome (les	s section	511 tax)	from businesses
				after June 30, 1975.							
10	\Box	An organizat	ion organized a	nd operated exclusive	elv to test	for publ	ic safety.	See sec	tion 509	(a)(4).	
11	$\overline{\mathbf{Q}}$			and operated exclusive							r to carry out the
•	_	purposes of	one or more pul	blicly supported organ	nizations	describe	d in section	on 509(a)	(1) or sec	tion 509(a)(2). See section
				at describes the type							
		a ☑ Type				e III–Fun				_	Type III-Other
	V			tify that the organizat							• •
٦				on managers and othe							
			section 509(a)(2)		i tilali on	01 111010	publicly	Jupporte	a organiz		
						41 IDO 4		- T 1	T	- u T	111
f		_		a written determinati		the IHS	that it is	a Type I	, Type II	, or type	iii supporting
		•	, check this box								
g		_		the organization acce	epted any	giπ or c	ontributio	on from a	iny of the		
		following per							.1 11		Yes No
				r indirectly controls, e				n persor	is descrit	pea in (ii)	11g(i) ×
				ning body of the supp		ganizatio	n, .				11g(ii) V
				erson described in (i) a							11g(in) /
			-	of a person described				•	•		[1 id/iii]
<u>h</u>				ation about the suppo			·		4.5.		()) 4
(i)		e of supported janization	(ii) EIN	(iii) Type of organization (described on lines 1–9		organization sted in your		ou notify		s the ion in col	(vii) Amount of support
	U.Ş	jui ii zutioi i		above or IRC section		document?	col (ı)	of your	(i) organi	zed in the	
				(see instructions))				oort?		S ?	
					Yes	No	Yes	No	Yes	No	
	Grea	at Lakes		Convention of Churches							040.050
<u>^</u>			34-1176574				~		-		216,259
Gra- Chu		ellowship		Church		_					
			34-1868178			-	-		· ·		23,000
		r Church of		Church							
God			34-1329655			•			~		200,000
		Church of		Church		<u> </u>					
God	l 		34-1380891				~		~		34,000
		er Church of		Church							
God	God		38-2744620			·	·		-		35,000
Tot	al			Ī	İ	İ	İ	İ		j i	508,259

Total

Par	t II Support Schedule for Org					and 17	'0(b)(1)(A)(vi)	
	(Complete only if you chec	ked the box	on line 5, 7,	or 8 of Part I.	.)		<u></u>	
	tion A. Public Support	() 2227			1 10 0000	1	l <i>m</i>	
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2	009 (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		1			 		
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>	1			<u> </u>		
	tion B. Total Support lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(0) 2	009 (f) Total	
		(a) 2005	(0) 2006	(6) 2007	(0) 2008	(e) 2	009 (I) Total	
7	Amounts from line 4							
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 .		<u> </u>			<u> </u>		
12	Gross receipts from related activities, etc.	. (see instruction	ons)			12		
13	First five years. If the Form 990 is for organization, check this box and stop he	ere	·					·) • 🗆
	tion C. Computation of Public Su		•			· · · · · · · · · · · · · · · · · · ·		
14	Public support percentage for 2009 (line		•	1, column (f))		14		<u>%</u>
15	Public support percentage from 2008 Sc	•	•			15		%_
16a	331/3 % support test-2009. If the organi				line 14 is 331/3	% or mo	re, check this bo	×
	and stop here. The organization qualifies				•	•		▶ □
b	331/3 % support test—2008. If the organi					33½% o	r more, check thi	
	box and stop here. The organization qua	•		-		•		▶ □
17a	10%-facts-and-circumstances test—20	-						
	more, and if the organization meets the "forganization meets the "facts-and-circum"				•	-		e ▶ □
b	10%-facts-and-circumstances test—2008 more, and if the organization meets the "rorganization meets the "facts-and-circumstance"	facts-and-circun ances" test The	nstances" test, i organization qu	check this box a alifies as a public	and stop here cly supported o	Explain rganizatio	n Part IV how the	e ▶ □
18	Private foundation. If the organization did	I not check a bo	ox on line 13, 16	a, 16b, 17a, or	17b, check this	box and	see instructions	▶ □

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

800	tion A. Public Support	o the box of	n line 9 of Pa	ATL 1.)		.	
$\overline{}$	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
U à	arendar year (or iiscar year beginning iii) 🕨	(a) 2000	(0) 2000	(0) 2007	(4) 2000	(6) 2003	(i) 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						
С	Add lines 7a and 7b						ļ
8	Public support (Subtract line 7c from line 6)	₩ j		* *	,		
	tion B. Total Support	,			T		
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	Amounts from line 6						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	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, and 12.)						
14	First five years. If the Form 990 is for organization, check this box and stop	here			•	ear as a secti	
Sec	ction C. Computation of Public Su	<u></u>					
15 16	Public support percentage for 2009 (lin Public support percentage from 2008 S	Schedule A, P	art III, line 15	ne 13, column	(f))	15 16	% %
Sec	ction D. Computation of Investmen	nt Income P	ercentage				
17	Investment income percentage for 200	9 (line 10c, co	lumn (f) dıvıde	d by line 13, c	olumn (f)) .	17	%
18	Investment income percentage from 20					18	%
19a	331/3 % support tests — 2009. If the organism sont more than 331/3 %, check this b						
ь	33% % support tests – 2008. If the organ line 18 is not more than 33% %, check this						
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19b	o, check this b	ox and see ins	structions 🕨 🛚

Page	4
· ugc	

Part 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.
Part I, line	11 h, column iv - Although Grace Fellowship Church, Mt. Tabor Church of God, Neptune Church of God, and
Pine Rive	r Church of God are not listed by name in our governing documents, they are inferred because our governing
document	s state we exist to support The Great Lakes Conference, Churches of God, General Conference and its member
churches	and agencies. These churches are member churches.
	······································
	······································
	······································

SCHEDULE D (Form 990)

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

	of the organization Foundation of the Great Lakes Conferen	ce, Churches of God, General Co	onference	31 : 1610743
Pai	Organizations Maintaining Do the organization answered "Yes		Similar Fu	inds or Accounts. Complete if
		(a) Donor advised funds		(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year) .			
4	Aggregate value at end of year			
5	Did the organization inform all donors and funds are the organization's property, sub-			
6	Did the organization inform all grantees, oused only for charitable purposes and no purpose conferring impermissible private	donors, and donor advisors in writi	ing that grai	nt funds can be , or for any other
Pai	· · · · · · · · · · · · · · · · · · ·			
		.,		7 0111 000, 1 01.11, 1110 7.
1	Purpose(s) of conservation easements he			of an historically important land area
	Preservation of land for public use (e.	-		of a certified historic structure
	Protection of natural habitat	□ F	reservation	of a certified historic structure
2	☐ Preservation of open space Complete lines 2a through 2d if the organi	zation held a qualified conservation	n contributio	on in the form of a conservation
_	easement on the last day of the tax year.	zation field a qualified conservation	Continuation	of the form of a conscivation
	,			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation		•	2b
c	Number of conservation easements on a		 tın (a)	2c
d	Number of conservation easements include		. ,	2d
	Number of conservation easements mode			minated by the organization during
3	the tax year	ned, transferred, released, extingu	isiled, or tel	minated by the organization during
4	Number of states where property subject	to conservation easement is local	ted ▶	
5	Does the organization have a written police	cy regarding the periodic monitorir	ng, inspectio	
6	violations, and enforcement of the conser Staff and volunteer hours devoted to more			— —
6	Stall and volunteer nours devoted to more	intolling, inspecting, and emorcing	Conservatio	in easements during the year
7	Amount of expenses incurred in monitorii	ng, inspecting, and enforcing cons	ervation eas	sements during the year
	▶ \$			
8	Does each conservation easement report 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		•	of section Yes No
9	In Part XIV, describe how the organization balance sheet, and include, if applicable, the organization's accounting for conserved.	the text of the footnote to the org	in its reveni anization's	ue and expense statement, and financial statements that describes
Pai	t III Organizations Maintaining Col Complete if the organization ans			Other Similar Assets.
1a	If the organization elected, as permitted u art, historical treasures, or other similar as provide, in Part XIV, the text of the footnote	sets held for public exhibition, educ	ation, or res	earch in furtherance of public service
b	If the organization elected, as permitted unistorical treasures, or other similar asset provide the following amounts relating to	s held for public exhibition, educa	venue stater tion, or rese	ment and balance sheet works of art earch in furtherance of public service
	(i) Revenues included in Form 990, Part	VIII, line 1		
	(ii) Assets included in Form 990, Part X			▶ \$
2	If the organization received or held work following amounts required to be reporte			assets for financial gain, provide the
а	Revenues included in Form 990, Part VIII	, line 1		▶ \$
b	Assets included in Form 990, Part X			. ▶ \$

D	2
Page	_

Par	t III Organizations Maintaini	ng Collections o	of Art, Hi	storical	Treasure	s, or C	Other Similar A	ssets (co	ntinued)
3	Using the organization's acquisition, collection items (check all that apply		ther reco	rds, ched	ck any of th	e follo	wing that are a si	gnıfıcant	use of its
а	Public exhibition		d		oan or exch				
b	Scholarly research		е	□ 0	ther				
С	Preservation for future generat	ions							
4	Provide a description of the organiz Part XIV.	ation's collections	and exp	laın how	they furthe	r the c	organization's exe	empt purp	ose in
5	During the year, did the organization sassets to be sold to raise funds rather	r than to be mainta	ined as pa	art of the	organizatio	n's coll	lection?	☐ Ye	
Par	t IV Escrow and Custodial A IV, line 9, or reported an					answe	ered "Yes" to Fo	rm 990, I	Part
	Is the organization an agent, trusted included on Form 990, Part X?					ions o	r other assets no	t 🗌 Ye	s 🗹 No
b	If "Yes," explain the arrangement in	Part XIV and com	iplete the	followin	g table.		1		
						-		mount	
	Beginning balance					10			<u>.</u>
	Additions during the year					. 10			
	Distributions during the year .					. 10			
	Ending balance					11			
b	Did the organization include an amount of "Yes," explain the arrangement in	Part XIV						✓ Ye	
Par	t V Endowment Funds. Co						1		
		(a) Current year	(b) Pric		(c) Two year	s back	(d) Three years back	(e) Four	years back
1a	Beginning of year balance	4,588,849	6,4	439,050					
b	Contributions					,	,	,	
С	Net investment earnings, gains,								
	and losses .	986,176		24,886)					
d	Grants or scholarships	508,259	•	115,926					
е	Other expenditures for facilities and programs	(249,967)		141,924					
f	Administrative expenses	57,445		67,465					
g	End of year balance	5,259,288	4,	588,849					
2	Provide the estimated percentage of	of the year end bal	lance held	d as					
а	Board designated or quasi-endown	nent ▶10	0 %						
b	Permanent endowment ▶	%							
С	Term endowment ▶ %	ó							
За	Are there endowment funds not in the	e possession of th	e organız	ation tha	t are held a	nd adn	ninistered for the	Г	
	organization by								Yes No
	(i) unrelated organizations							3a(i)	
								3a(ii)	· ·
ь 4	If "Yes" to 3a(II), are the related org Describe in Part XIV the intended up							3b	
	t VI Investments—Land, Bu)ort V	line 10	-	
rai					1				
	Description of investment	(a) Cost or ot (investm			st or other s (other)		Accumulated depreciation	(d) Book	value
	Land								
	Buildings								
С	Leasehold improvements	.							
d	Equipment				4,765		4,575		190
	Other		00 0-44		4,900		4,900		
ota	I. Add lines 1a through 1e. (Column (d)	must equal Form 9	eu, Part X,	column	(¤), IINE 10(c	<u>)) . </u>	<u> ▶ </u>	***	190

Part VII Investments—Other Securities.	See Form 990, Part 2	K. line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v Cost or end-of-year	
Financial derivatives			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.)		* * * * * *	<u> </u>
Part VIII Investments—Program Related (a) Description of investment type	(b) Book value	X, line 13. (c) Method of Cost or end-of-year	valuation r market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.) ▶		* C	
Part IX Other Assets. See Form 990, Par			
Interest Receivable Deposits Receivable	(a) Description		(b) Book value 12,732 44
Total. (Column (b) must equal Form 990, Part X, col. (i Part X Other Liabilities. See Form 990, I			12,776
1. (a) Description of liability	(b) Amount		
Federal income taxes		The property of the control of the c	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶			λ

Page	•
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Do	N. D. William Colons in New Assets from English and All Inches		1 290 1
-	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial S		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	(97,340)
2	Total expenses (Form 990, Part IX, column (A), line 25)	3	565,812
3	Excess or (deficit) for the year Subtract line 2 from line 1	4	(663,152) 1,156,443
4	Net unrealized gains (losses) on investments	_ 4	1,130,443
5	Donated services and use of facilities	6	
6	Investment expenses	7	
7	Prior period adjustments	8	271,040
8	Other (Describe in Part XIV)	9	1,427,483
9 10	Total adjustments (net). Add lines 4 through 8	10	764,331
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenu		
	Total revenue, gains, and other support per audited financial statements	1	
1 2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	<u> </u>	
	Net unrealized gains on investments	13	
a	Donated services and use of facilities		
b	Donated Services and use of facilities	00	
c d	Other (Describe in Part XIV)	_	
e	Add lines 2a through 2d	20	1,177,516
3	Subtract line 2e from line 1	3	
3 4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		(112,011)
•	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 14,97	71 🐼	· ·
a b	Other (Describe in Part XIV.)	- "	*
C	Add lines 4a and 4b	40	14,971
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Pa	T XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	ses i	
1	Total expenses and losses per audited financial statements	<u> </u>	300,874
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	;	į
a	Donated services and use of facilities	8	*
b	Prior year adjustments	7 3	*
c	Other losses		
d	Other (Describe in Part XIV.)	7)	
e	Add lines 2a through 2d	2	e (249,967)
3	Subtract line 2e from line 1	3	550,841
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 14,9		*
b	Other (Describe in Part XIV.)	-	*
C	Add lines 4a and 4b	4	14,971
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	565,812
Pai	t XIV Supplemental Information		
Com	uplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a a	nd 4.	Part IV. lines 1b
	2b, Part V, line 4, Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d a		
this	part to provide any additional information.		
Dan	t IV, Line 2a - Investment facilitator agreement with The Great Lakes Conference, Churches	-6 C -	d Canaral
Par	t IV, Line 2a - Investment facilitator agreement with The Great Lakes Conference, Churches	or Go	oa, Generai
Col	oference. The agreement provides for the investment of assets.		
	The agreement provides for the investment of assets.		
Par	t V, Line 4 - Generate income and growth for supporting the ministries of The Great Lakes C		
Go	d, General Conference and its member churches and agencies.		
Par	t XI, Line 8 - \$94,000 grants returned; (\$72,927) investment facilitator agreement; \$249,967 S	FAS	No. 136 adjustment
for	year 2009 activity.		

Schedule D (For	m 990) 2009	Page 5
Part XIV	Supplemental Information (continued)	
	e 2d - (\$72,927) investment facilitator agreement.	
Part XIII, Lir	ne 2d - (\$249,967) SFAS No. 136 adjustment for year 2009 activity.	
• • • • • • • • • • • • • • • • • • • •		
• • • • • • • • • • • • • • • • • • • •		
		
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047

Open to Public Inspection 2009

Employer identification number

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

The Foundation of the Great Lakes Conference, Churches of God, General Conference	31	1610743	
Part I General Information on Grants and Assistance			
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	assistance, and		į
			2
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to	on answered "	'Yes" to	
Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use	ed more than	\$5,000. Use	
Part IV and Schedule I-1 (Form 990) if additional space is needed			□

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Great Lakes Conference, Churches of God, General Confer	34-1176574	501(c) (3)	50,507		FMV		Church Planting
700 E. Melrose Ave. PO Box 1132 Findlay, OH 45839							Staff
			43,291		FMV		Church start-up
							support
			25,000		FMV		Seminary support
			23,461		FMV		Hospital Pastoral
	i.						Care
			22,000		FMV		Church camp staff
			20,000		FMV		Building construc.
			15,000		FMV		Meeting and
	:						training support
			10,000		FMV		Benevolent funds
	1(c)(3) and goverr	nment organizations			·		S C
3 Enter total number of other organizations	janizations		•				÷

Schedule I (Form 990) 2009

Cat No 50055P

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

11 330/ 5003												
Grants and Other Assistance to Individuals in the United States. Complete if the organization answered	Other	- Assistance	5	Individuals	.⊑	the l	United	States.	Complete if	the organ	nization a	nswered
Use Dart IV and Schedule I-1 (Form 990) if additional space is needed	y Pue	/ 1-1 all hada	Ī	1000 m	ŧ	cuo	POCUS	abaga si	Ţ			

חשב ח	OSE FAIL IV AIN SCHEUNE FILL (FOIL) 330/ HAUGHINIA SPACE IS HEEDEN.	990) if additional	space is lieeded.			
(a) Type c	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

						3
Part IV Supplem	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	e this part to pro	ovide the information	on required in Part	I, line 2, and any other	additional information.
1, Line 2 - Signed	grant agreements between T	he Foundation of	the Great Lakes Co	nference, Churches	of God, General Confere	Part I, Line 2 - Signed grant agreements between The Foundation of the Great Lakes Conference, Churches of God, General Conference and the recipient require the
pient to provide	recipient to provide periodic written progress reports that include an update on the program/activity being funded by the grant and financial statements. The	rts that include a	n update on the pro	gram/activity being f	unded by the grant and	inancial statements. The
Indation reserves	Foundation reserves the right to make site visits as well. Fin	s well. Final repo	nts require a review	of performance and	activities as well as con	al reports require a review of performance and activities as well as completed financial statements.
eements require	recipients to use the grants fo	r the agreed upor	n program/activity.	Unused grant funds	must be returned and T	Agreements require recipients to use the grants for the agreed upon program/activity. Unused grant funds must be returned and The Foundation reserves the right to
ninate the grant il	terminate the grant if the recipient has misused or misrepresented how the grant was to be used.	misrepresented b	ow the grant was to	be used.		

SCHEDULE 1-1 (Form 990)

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

Open to Public Inspection

OMB No 1545-0047

for needy pastors. Remodel Building (h) Purpose of grant **Building Constr.** Handicap Chair or assistance Mold Removal Employer identification number 1610743 Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) Ħ (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) ₽M FM≺ FM< FM< (c) IRC section if (d) Amount of cash grant (e) Amount of non-cash applicable assistance 35,000 34,000 15,000 8,000 23,000 The Foundation of the Great Lakes Conference, Churches of God, General Conference 501(c) (3) 501(c) (3) 501(c) (3) 38-2744620 34-1380891 34-1868178 (p) EIN (a) Name and address of organization or government 9970 Crystal Rd. PO Box 326 Pine River Church of God Grace Fellowship Church Neptune Church of God Loudonville, OH 44842 Vestaburg, MI 48891 Vame of the organization 2150 Twp. Rd. 585 Celina, OH 45822 7979 US 33 Total

Schedule I-1 (Form 990) 2009

Cat No 51026W

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

Page 2

Schedule I-1 (Form 990) 2009

(a) Type of grant or assistance (b)	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990

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

► Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number Name of the organization 1610743 The Foundation of the Great Lakes Conference, Churches of God, General Conference 31 Form 990 Part III, Line 4d: \$20,000 grant to The Great Lakes Conference, Churches of God, General Conference for building construction. \$25,000 grant to The Great Lakes Conference, Churches of God, General Conference for seminary support. \$15,000 grant to The Great Lakes Conference, Churches of God, General Conference for meeting and teaching support. \$22,000 grant to The Great Lakes Conference, Churches of God, General Conference for church camp staffing. \$23,461 grant to The Great Lakes Conference, Churches of God, General Conference for hospital pastoral care. \$10,000 grant to The Great Lakes Conference, Churches of God, General Conference for benevolent funds for needy \$7,000 grant to The Great Lakes Conference, Churches of God, General Conference for building construction. \$15,000 grant to Grace Fellowship Church for building remodeling. \$8,000 grant to Grace Fellowship Church for removal of mold from church building. \$34,000 grant to Neptune Church of God for a handicap chair lift. \$35,000 grant to Pine River Church of God for building construction. Form 990 Part VI, Line 11a - Each voting member is provided a written copy of the Form 990 and its supporting schedules for review and discussion. A vote of approval for filing is taken. Form 990 Part VI, Line 12c - An annual disclosure reporting form is distributed, collected, and reviewed from each director, officer and employee. Form 990 Part VI, Line 15a and b - The governing board reviews the compensation of its President and Financial Controller as a part of its annual budget establishment. This review includes a review of performance and formal and/or

informal gathering of appropriate compensation rates.

Schedule O (Form 990) 2009	Page 2
Name of the organization	Employer identification number
The Foundation of the Great Lakes Conference, Churches of God, General Conference	31 1610743
Form 990 Part VI, Line 19 - The organization's governing documents, conflict of interest p	oolicy, and financial statements
are available to the public in written form upon request.	•
Form 990, Schedule R, Part II - The reporting organization is controlled by The Great Lake	es Conference, Churches of God,
General Conference (34-1176574), 700 E. Melrose Ave., PO Box 1132, Findlay, OH	45839, a subordinate in a group
exemption number 4256 of which Churches of God, General Conference (23-64240	46) is the central organization.
Also, a grant was awarded to Mt. Tabor Church of God (34-1329655), 9744 US 127 N	N, Celina OH 45822, which is also
a subordinate of group exemption number 4256.	
·	
	•••••

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. See separate instructions. Attach to Form 990.

Employer identification number

(f)
Direct controlling entity (f)
Direct controlling entity 1610743 Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it ٧ Church N/A Church N/A Church (e)
Public charity status
(if section 501(c)(3)) (e) End-of-year assets 31 Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) 501(c) (3) 501(c) (3) (d) Exempt Code section 501(c) (3) (d) Total income (c)
Legal domicile (state
or foreign country) (c)
Legal domicile (state
or foreign country) HO HO ₹ Primary activity Primary activity had one or more related tax-exempt organizations during the tax year.) The Foundation of the Great Lakes Conference, Churches of God, General Conference Church Church Church Neptune Church of God 34-1380891 7979 US 33 Celina, OH 45822 (a)
Name, address, and EIN of related organization (a)Name, address, and EIN of disregarded entity 48891 2150 Twp. Rd. 585 Loudonville, OH 44842 9970 Crystal Rd. PO Box 326 Vestaburg, MI Pine River Church of God 38-2744620 Grace Fellowship Church 34-1868178 Name of the organization Part I Part II

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

For more information see Schedule O

Cat No 50135Y

Schedule R (Form 990) 2009

Schedule R (Form 990) 2009

Yes No managing partner? Percentage ownership General or Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Ξ Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets 9 (h)
Disproportionate
allocations? å Yes Share of total income (g) Share of end-of-year assets Type of entity (C corp, S corp, or trust) because it had one or more related organizations treated as a partnership during the tax year.) (f) Share of total income Direct controlling entity ਭ Predominant income (related, unrelated, excluded from Legal domicile (state or foreign country) tax under sections 512-514) (d)
I Direct controlling entity Primary activity (c) Legal domicile (state or foreign country) Name, address, and EIN of related organization Primary activity Name, address, and EIN of related organization Part III Part IV

Schedule R (Form 990) 2009

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.) Part V

And the second s			\vdash	l
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	Si	_1
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	Parts II-IV?			I
a Beceint of (ii) interest (ii) annuties (iii) rovalties or (iv) rent from a controlled entity		1a	,	
		÷		l
b Gift, grant, or capital contribution to other organization(s)		+	+	1
c Gift, grant, or capital contribution from other organization(s)	•	10	>	I
		19	,	
		1e	,	1
				1
		*	•	
t Sale of assets to other organization(s)		= .	. -	
g Purchase of assets from other organization(s)		<u>6</u> ,	`	- 1
h Exchange of assets	٠	1	,	
o rotto of atomorphism to the party of the p		Ę	,	
Lease of achieves, equipment, of other assets to other organization(s)				Γ
			3	1
J Lease of facilities, equipment, of other assets from other organization(s)		- ;	. `	1
k Performance of services or membership or fundraising solicitations for other organization(s)		2	•	I
1 Performance of services or membership or fundraising solicitations by other organization(s)		=	`	į
m Sharing of facilities, equipment, mailing lists, or other assets		E	>	- 1
n Sharing of paid employees		£	,	
	· · · ·			l
o Dough income at a other engineers for according		101		ì
		5	\ `	1
p Heimbursement paid by otner organization for expenses		2		1
		i 		
q Other transfer of cash or property to other organization(s)		5	`	- [
		1r	•	- 1
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	lationships and transac	ction thres	sholds.	ار
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	olved	1
(1)				-
(2)				- 1
(3)				
(4)				
				1
(9)				1
	Schedule	Schedule R (Form 990) 2009	90) 200	6

Page 4

Schedule R (Form 990) 2009

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.) Part VI Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or arrest and a related organization. See instructions regarding exclusion for certain investment partnerships

Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Are all partners section	9 9	(1) Disproportionate allocations?	(g) nate Code V—UBI s ² amount in box 20		General or managing
		country)	501(c)(3) organizations?	assets		of Schedule K-1 (Form 1065)		riner'
			Yes No		Yes No	op	Yes	ž
				:				
			i					