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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)

OMB No 1545-0047 2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

	For t	the 2009 calen	dar year,	or tax year be	ginning		, 2009	, and endi	ng			,	
В		if applicable		C Name of org						D Employ	er Iden	tification Number	
		Address change	Please use IRS label	HARVEST	PRAYER MIN	NISTRIES	3			35-3	1905	5130	
		lame change	or print or type.		street (or P O box if			addr) Room/	suite	E Telepho	ле пип	nber	
		nitial return	See specific	619 WASH	INGTON AVE	2				(81	2) 2	238-5504	
		ermination	Instruc- tions.	City, town o			State	ZIP code +	4	, , , , , , , , , , , , , , , , , , ,			
		Amended return		TERRE HA	יייד		IN	47805		G Gross r	acainte	\$ 698,247.	
	Ħ	Application pending	F Name a	and address of pri				1,000	H(a) Is this	a group retur			
	ш,	opplication pending	Į.	-	WHITE PINE S	י יידם פגיי	напте т	N 47803	1	affiliates incl		Yes No	
$\overline{}$	Ta	x-exempt statu) ◀ (insert no)		7(a)(1) or	527	If 'No,'	attach a list	(see in		
:		ebsite: N/		(6) (3) · (IIISelt IIO)		7 (a)(1) UI	1 327	H(a) Craus	avamatian n		•	
у К		m of organization	X Corpora	ation Trust	Association	Other ►		V		n 1991 M State of legal domicile IN			
	ırt I	Summa		ation Trust	ASSOCIATION	Outer	, , ,	Teal Of Forma	11011 199	<u> </u>	state of	legal dofficile III	
<u> </u>	1			anization's m	ission or most s	onificant ac	tivities: H	PM PROV	TDES S	PTRTTI	IAT.	TRAINING	
4.	ļ •				CE OF PRAYE						·		
20					DEVELOPING						JG -		
Activities & Governance					ANGELISM			. – – – –				-	
ove.	2				ation discontinue	d its operat	ions or disp	osed of mo	re than 25	% of its as	 ssets.		
9	3				verning body (Pa							9	
စ္မ	4				pers of the gover	nıng body (l	Part VI, line	1b)	•		4	9	
롲	5	Total number		, , ,					•	•	5	17	
ts CE	5	Total number	or volunt	eers (estimate	e if necessary) nue from Part VII	Pi	-CE13/1] .		6 7a	15,703.	
					ne from Form 99						7 b		
	-	THE UTILITIES	Dusiness	taxable incol	ne nom rom 32	[2]		12	<u> </u>	Prior Year	,,,,	Current Year	
		8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) MAY 2 1 2010									26.	446,190.	
Ĕ	9		_			"-		182		113,4	_		
9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and @GDEN 1, 278.										405.			
æ	11				, lines 5, 6d, 8c,					31,4		43,038.	
	12				11 (must equal l			ne 12)		812,1		560,223.	
	13	Grants and s	ımılar amı	ounts paid (Pa	art IX, column (A), lines 1-3)		·					
	14 Benefits paid to or for members (Part IX, column (A), line 4)												
ø										585,5	38.	394,469.	
Expenses	16a	Professional	fundraisin	g fees (Part I	X, column (A), lı	ne 11e)							
ğ	l t	Total fundraising expenses (Part IX, column (D), line 25) ► 0 .											
ű	17	Other expens	es (Part I	X. column (A)), lines 11a-11d,	11f-24f)				321,1	21.	223,090.	
	18		-		ıst equal Part IX	-), line 25)	•		906,6			
	19	•		•	e 18 from line 12		,, , , , , , , , , , , , , , , , , , , ,			-94,4		-57,336.	
8 8					•				Begi	⊓ning of Y		End of Year	
Net Assets or Fund Balancos	20	Total assets	(Part X. III	ne 16)					, Deg.	245,5		213,528.	
AB	21	Total liabilitie	• .	•						185,8		210,969.	
ξĒ	22		•	•	ct line 21 from lir	ne 20				59,6		2,559.	
Pa	ırt II		ure Blo		<u> </u>			<u> </u>		027			
					eve examined this reti	ırn including ad	companying sc	hedules and st	atements an	d to the hest of	nf mv k	nowledge and belief it is	
		true, correct, a	and complete	Declaration of p	reparer (other than of	icer) is based o	on all informatio	n of which pre	parer has any	knowledge	۰ <i>,</i>	nowledge and belief, it is	
Sig	ın		Jan	~/ //	Alla					5/17	//	(2	
He	re	Signature	of officer						Da	ate		<u> </u>	
		► DAVI	D BUTT	S									
			rint name an								-		
					1 m			Date	C	heck if	Ę	Preparer's identifying number see instructions)	
Pa	id	D		/)//	/ /]/				S	elf- mployed	\square	ace manuchona)	
Pro	e-	Preparer's signature	>	M	Y			05/13/3		E	\neg		
	rer's	Firm's name (or Hob	be & Com	pany, Inc.				-		<u>'</u> _		
Us		yours if self-			ton Street				EIN - 13-4262668				
On	ııу	employed), address, and ZIP + 4		re Haute			IN 478	07	Phone no ► (812) 234-7984				
Mar	y the				rer shown above	? (see ınstr						X Yes No	
					on Act Notice, s			tions.		TEEA0101	07/20		

arl		HARVEST PRAYER M	INISTRIES rvice Accomplishments		905130	
		the organization's mission			-	
	•	DES SPIRITUAL TE				
				D CEMTNADO		
			F PRAYER BY CONDUCTING PRAYE	K SEMINARS,		
	See Form 990,	Page 2, Part III, Line 1 (o	ontinued)			
2	Did the organiz	ation undertake any signi	icant program services during the year which v	vere not listed on the prior	_	_
	Form 990 or 99	0-EZ? .			Yes	X
	If 'Yes,' describ	e these new services on S	Schedule O.			
3	Did the organiz	ation cease conducting, o	r make significant changes in how it conducts,	any program services?	Yes	X
	-	e these changes on Sche			_	
4		_	nts for each of the organization's three largest	program services by expens	es Section 50)1 <i>(</i> c) <i>(</i> 3
	and 501(c)(4) o	rganizations and section	4947(a)(1) trusts are required to report the amo	ount of grants and allocations	to others, the	e tota
	expenses, and	revenue, if any, for each	program service reported.			
4a			346,095. including grants of \$	0. (Revenue	\$ 54	4,5
	CONDUCTIN	G PRAYER SEMINA	RS & PRACTICE OF PRAYER			
		 				
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					_	
4b	(Code:) (Expenses \$	including grants of \$) (Revenue	\$	
					-	
		-				
						- - -
						- - -
				- -	- <i></i>	
		_ 				
4c	(Code:) (Expenses \$	including grants of \$	(Revenue	\$	
						-
	- 	-		-	_	
	-					- -
					-	
		-				- - -
						- - -
			*			 _
4d	Other program	services. (Describe in Sci	nedule O.)	,		
	(Expenses	\$	including grants of \$) (Revenue \$)
		service expenses ►	346,095.			

Form 990 (2009) HARVEST PRAYER MINISTRIES

Part 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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? .	2		Х
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_		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		X
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		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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		X
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	9		v
10	Schedule D, Part IV 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		x x
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		<u> </u>
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI		ě	
•	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 .		Ŷ	
•	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 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			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		х
	AWas the organization included in consolidated, independent audited financial statement for the tax Yes No			
12	year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional	12		
	a Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		<u>X</u>
	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		x
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		х
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		<u> x</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'	19		х
20	complete Schedule G, Part III	20		<u>x</u>

Part IV. Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		_X_
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		x
248	a 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, and 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		
Ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(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		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
2 5 a	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		x
ı	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		х
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
i	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ı	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		x
	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	<u> </u>	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i> .	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33	_	X
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		х
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	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38		x

BAA

Form 990 (2009)

Part V . Statements Regarding Other IRS Filings and Tax Compliance

					Yes	No
1 a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1 a	0		*	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b	0		, I	
c	Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?	and re	eportable gaming	1 c	X	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the					
21	calendar year ending with or within the year covered by this return	2a	17			
26	of at least one is reported on line 2a, did the organization file all required federal employment			2b	X	 -
٦.	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	•	•			لــــا
5 a	Did the organization have unrelated business gross income of \$1,000 or more during the year this return?	cover	ea by	3a		х
b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O			3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature of financial account in a foreign country (such as a bank account, securities account, or other fin	r othe ancıal	r authority over, a account)?	4a		x
b	If 'Yes,' enter the name of the foreign country.				1000	8 4 4
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of F Financial Accounts	oreign	Bank and	: * / :		
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	year?		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter	trans	action?	5b		X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Enti- Tax Shelter Transaction?	ty Reg	arding Prohibited	5c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, an solicit any contributions that were not tax deductible?	d did t	the organization	6a		х
b	If 'Yes,' did the organization include with every solicitation an express statement that such condeductible?	trıbutı	ons or gifts were not .	6b		
7	Organizations that may receive deductible contributions under section 170(c).			8 5. 1	, , , , , , , , , , , , , , , , , , ,	1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly do not be payor?	rtly fo	goods and services	7a		х
b	of Yes, did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for whi Form 8282?	ch it w	as required to file	7c		х
d	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 benefit contract?	on a	personal	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit	fit con	tract?	7f		X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as re			7g		
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form	•		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	orga	nizations. Did the			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, har holdings at any time during the year?	ve exc	ess business	8		x
9	Sponsoring organizations maintaining donor advised funds.				, ,	
а	Did the organization make any taxable distributions under section 4966?			9a		Х
	Did the organization make any distribution to a donor, donor advisor, or related person?			9b		Х
	Section 501(c)(7) organizations. Enter					
	Initiation fees and capital contributions included on Part VIII, line 12	10a			İ	
	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10Ь				
	Section 501(c)(12) organizations. Enter:					
	Gross income from other members or shareholders	11 a			-	
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of		1041?	12a		
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b				

BAA Form **990** (2009)

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.

		9 = 0 u , u	nd Manage	<u> </u>						 -		
								1 - 1-			Yes	No
		_	-	-	-		•					
		•		•						_		
Did any officer, d	officer, directo irector, truste	or, trustee, o e or key em	r key employ ployee?	ree have a	family rela	itionship or a	business rel	ationship v	vith any other .	2		Х
Did the o	organization de	elegate con	trol over man	agement d	luties custo	marily perfo	rmed by or ur	nder the dir	ect supervision	3		Х
					_		•			 		X
	_			900 10 110 1								
				vear of a n	naterial div	ersion of the	organization	's assets?		5		Х
	•		•	•			, o, gaa					X
Does the	organization				her person	s who may	elect one or m	ore memb	ers of the			
•	• ,	••••••						•				X
•				• •	•	·	•	•		/ 0		X
		ontemporan	eously docum	nent the m	eeungs nei	a or written	actions under	taken durir	ig the year by			
The gove	erning body?									8a	X	
•	0 -	authority to	act on behalf	of the gov	erning bod	y?		•	•	. 8b	X	
Is there a	anv officer, di	rector or tru	stee, or kev e	emplovee 1	ısted ın Pa	rt VII. Sectio	on A, who can	not be read	ched at the			ų,
								roquiroo	hy the Interi			<u> X</u>
•••		(THIS SE	cuon b re	quesis II	nonnauc	πι αυσάι μ	ioncies not	required	by the inten	iai		
enue coue						<u> </u>	_			-	Voc	No
Doos the	organization	have locat	chanters bra	nebes era	offiliates?					100	res	X
	_		•	•		••				10 a		^
and brar	nches to ensur	re their opei	ations are co	insistent w	ith those of	f the organiz	ation?		•	10ь	_	
						-		_	the form?	11	X	<u> </u>
		•		-	-			•				
	_				-				•	12a		X
		or trustees,	and key emp	oloyees rec	quired to di	sclose annu	ally interests t	that could o	give rise	12b		
Does the Schedule	e organization e O how this i	regularly as s done	nd consistent	ly monitor	and enforc	e compliand	e with the pol	icy? <i>If 'Ye</i> s	s,' describe in 	. 12c		
Does the	organization	have a writ	ten whistleblo	ower policy	?					13	Х	
Does the	organization	have a writ	ten document	t retention	and destru	ction policy	,		,	. 14	Х	
Did the p	process for de	termining c	ompensation contemporan	of the follo	wing perso	ons include a	a review and a	approval by	ındependent			
•		-	-							15a	x	
•		•	•	•	g=Gill Off							
	-	· -	_		ule O. (See	e instructions			• • •	.55		
Did the	organization in	nvest in, cor	•		•		•	arrangeme	nt with a taxable			
entity du	ring the year?	? .		•				•	•••	16a		X
ın joint v	enture arrang	jements und	ler applicable	federal ta	x law, and	taken steps	to safeguard	the organiz	zation's exempt	ļ		
			,	•		•	· · ·	-	 ··-		<u>'</u> -	<u>. </u>
			of this Form 9	90 is requ	ured to be t	filed > Tr	diana					
Section	6104 requires	an organiz	ation to make	ts Forms	1023 (or 1	024 if applic		 nd 990-T (5	501(c)(3)s only)	avaılable	for pu	ablic
		· —			_							
Describe stateme	e in Schedule nts available t	O whether (and if so, how	w) the orga	anızatıon m	iakes its gov	erning docum	ents, confl	ict of interest po	licy, and	financ	al
		ical address			· ·	•			=			EE O
► DAVE	ROOLS -		1 <u>529 </u>	AHT.E.B	INE ST	_TERRE_	HAUTE]	<u> 1N _ 47</u>	803	(812)_2	<u> </u>	<u>550</u> 4
	Did the conficer of the confic	Did any officer, director officer, director, trusted. Did the organization of of officers, directors of Did the organization of Did the organization of Does the organization of Did the organization of Does the organization of Did the organization of Did the organization of the following: The governing body? Are any decisions of the following: The governing body? Each committee with a list here any officer, diorganization's mailing of the organization of the following: Does the organization of the following: Does the organization of the following: Does the organization of the process of the organization of the process for depersons, comparability. The organization of the process for depersons, comparability. The organization of the organization of the process for depersons, comparability. The organization of the	Enter the number of voting member of dany officer, director, trustee, cofficer, director, trustee or key embed of officers, directors or trustees, or Did the organization make any signification of officers, directors or trustees, or Did the organization make any significant the prior Form 990 was filled Did the organization become award Does the organization have member of Does the organization have member of Does the organization have member of Did the organization contemporant the following: The governing body? Each committee with authority to dister any officer, director or truster of the organization's mailing address? In the organization's mailing address? In the organization have a write of the organization provided a compose of the organization have a write of the organization of the organization have a write of the organization of the organization have a write of the o	Enter the number of voting members that are in Did any officer, director, trustee, or key employ officer, director, trustee or key employee? Did the organization delegate control over man of officers, directors or trustees, or key employ Did the organization make any significant chan since the prior Form 990 was filed? Did the organization become aware during the Does the organization have members or stockhologoverning body? Are any decisions of the governing body subject of the organization contemporaneously document following: The governing body? Each committee with authority to act on behalf is there any officer, director or trustee, or key organization's mailing address? If 'Yes,' providation B. Policies (This Section B reserve Code) To Does the organization have local chapters, brain distanches to ensure their operations are considered to the process, if any, us to Does the organization have a written politicate of the organization have a written conflict of the process, if any, us to Does the organization have a written conflict of the officers, directors or trustees, and key empto conflicts? Does the organization regularly and consistent Schedule O how this is done Does the organization have a written whistleble Does the organization have a written whistleble Does the organization have a written whistleble Does the organization have a written documen Did the process for determining compensation persons, comparability data, and contemporantal The organization's CEO, Executive Director, or the Other officers of key employees of the organization if 'Yes' to line 15a or 15b, describe the process of Did the organization invest in, contribute asset entity during the year? The organization of the process of the organization inventure arrangements under applicable status with respect to such arrangements? The organization indicate how you make these available to the public. Section 6104 requires an organization to make inspection indicate how you make these available to the public.	Enter the number of voting members that are independent Did any officer, director, trustee, or key employee? Did the organization delegate control over management of officers, directors or trustees, or key employees to a model of officers, directors or trustees, or key employees to a model of officers, directors or trustees, or key employees to a model of officers, directors or trustees, or key employees to a model of officers, directors or trustees, or key employees to a model of the organization make any significant changes to its officers, director or trustee, or key employees or downing body? Does the organization have members, stockholders, or officers, and decisions of the governing body subject to approximate the organization contemporaneously document the model of the organization contemporaneously document the model of the organization body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? The governing body? Each committee with authority to act on behalf of the governing body? The governing body? Does the organization for inviste, or key employees in organization's mailing address? If 'Yes,' provide the name and branches to ensure their operations are consistent with the organization have local chapters, branches, or any and branches to ensure their operations are consistent with the organization have a written conflict of interest process the organization have a written conflict of interest process the organization have a written whistleblower policy or in the process for determining compensation of the folic persons, comparability data, and contemporaneous substance to conflicts? Does the organization have a written whistleblower policy between the organization in the process for determining compensation of the folic persons, comparability data, and contemporaneous substance of the organization invest in, contribute assets to, or p	officer, director, trustee or key employee? Did the organization delegate control over management duties custo of officers, directors or trustees, or key employees to a management Did the organization make any significant changes to its organization since the prior Form 990 was filed? Did the organization become aware during the year of a material dividence of the organization have members or stockholders? Does the organization have members, stockholders, or other person governing body? Are any decisions of the governing body subject to approval by men Did the organization contemporaneously document the meetings held the following: The governing body? Each committee with authority to act on behalf of the governing body is there any officer, director or trustee, or key employee listed in Palorganization's mailing address? If 'Yes,' provide the names and addition B. Policies (This Section B requests information and branches to ensure their operations are consistent with those or Has the organization have local chapters, branches, or affiliates? Does the organization provided a copy of this Form 990 to all members and branches to ensure their operations are consistent with those or Has the organization have a written policies and procedures and branches to ensure their operations are consistent with those or Local Does the organization have a written conflict of interest policy? If 'No Are officers, directors or trustees, and key employees required to do to conflicts? Does the organization have a written whistleblower policy? Does the organization have a written whistleblower policy? Does the organization have a written whistleblower policy? Does the organization have a written obcument retention and destruing the year? Did the process for determining compensation of the following persons, comparability data, and contemporaneous substantiation of the organization have a written policy or procedure in joint venture arrangements under applicable federal tax law, and status with respect to such arrangemen	Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a officer, director, trustee or key employee. Did the organization delegate control over management duties customarily perfor of officers, directors or trustees, or key employees to a management company of the organization make any significant changes to its organizational documer since the prior Form 990 was filed? Did the organization become aware during the year of a material diversion of the Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may deport any decisions of the governing body subject to approval by members, stockhold the organization contemporaneously document the meetings held or written the following: The governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section B. Policies (This Section B requests information about particular than the organization have written policies and procedures governing the and branches to ensure their operations are consistent with those of the organization branches to ensure their operations are consistent with those of the organization branches to ensure their operations are consistent with those of the organization brave a written conflict of interest policy? If No, 'go to line to Are officers, directors or trustees, and key employees required to disclose annuit to conflicts? Does the organization have a written whistleblower policy? Does the organization have a written whistleblowe	Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business rel officer, director, frustee or key employees Did the organization delegate control over management duties customarily performed by or ur 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? Did the organization become aware during the year of a material diversion of the organization become aware during the year of a material diversion of the organization Does the organization have members or stockholders, or other persons who may elect one or my overning body? Does the organization have members, stockholders, or other persons who may elect one or my overning body? 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If No, go to line 13 A or officers, directors or trustees, and key employees required to disclose annually interests to conflicts? Does the organization have a written whistleblower policy? Does the organization have a written whistleblower policy? Does the organ	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 or officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the dire 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? Did the organization become aware during the year of a material diversion of the organization's assets? Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more memb governing body? Dare any decisions of the governing body subject to approval by members, stockholders, or other persons Did the organization contemporaneously document the meetings held or written actions undertaken during the following: The governing body? Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be read organization's mailing address? If Yes, provide the names and addresses in Schedule O dition B. Policies (This Section B requests information about policies not required in the policies of the organization have local chapters, branches, or affiliates? If Yes, does the organization have local chapters, branches, or affiliates? If Yes, does the organization have written policies and procedures governing the activities of such chapter and branches to ensure their operations are consistent with those of the organization? Does the organization have a written conflict of interest policy? If Yes, to the Is 3 Are officers, directors or trustees, and key employees required to disclose annually interests that could of to conflicts? Does the organization have a written officit of interest policy? If Yes to the Is 3 Are officers, directors or trustees, and key employees required to d	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? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, director, trustee or key employees to a management company or other person? Did the organization make any significant changes to its organizational documents since the pion Form 990 was filed? Did the organization have members or stockholders? Did the organization have members or stockholders, or other persons who may elect one or more members of the governing body? Does the organization have members or stockholders, or other persons who may elect one or more members of the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the poverning body? Each committee with authority to act on behalf of the poverning body? Each committee with authority to act on behalf of the poverning body? Each committee with authority to act on behalf of the poverning body? Each committee with authority to act on behalf of the poverning body? 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Did the organization make any significant changes to its organizational documents since the prior form 990 was filed? Did the organization have members or stockholders? Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members of the giverning body? 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. The governing body? Beach committee with authority to act on behalf of the governing body? Is there any officer, director or trustee, or key employee listed in Part VIII, Section A, who cannot be reached at the organization's mailing address? If Yes, provide the names and addresses in Schedule O. Does the organization have local chapters, branches, or affiliates? 10 Designed to 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? 11 Personal organization have a written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 11 Personal organization and account of the deliberation and decision? 12 Does the organization and a written policies and procedures governing the process th	Enter the number of voting members of the governing body Enter the number of voting members that are independent Dut any officer, director, trustee or key employee have a family relationship or a business relationship with any other officer, director, trustees or key employees to a 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? 2 Dut the organization make any significant changes to its organizational documents assets or professional documents or professional make any significant changes to its organizational documents assets or professional documents or professional makes and the professional professional documents of the professional professional professional documents of the organization have members or stockholders? Does the organization have members or stockholders? Does the organization have members or stockholders? Does the organization have members of the organization of the organization on the professional pr

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations'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 employees.'
- 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 no	t compens	ate an	у сі	ırrei	nt of	ficer,	direc	ctor, or trustee.		
(A)	(B)	-		(4	c)	_		(D)	(E)	(F)
Name and Title	Average hours per week	or direx ਨਾ	o unstitutional foistee	Offic Pr	all key amployee	And the strongersaled the temployees	y) rornel	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
DAVID BUTTS									- 	
PRES/CEO	40.00			Х	Х	•		45,542.	0.	0.
KIMBERLY BUTTS SECRETARY	40.00			х	х			25,800.	0.	0.
VINCE MCFARLAND BOARD CHAIRMAN	2.00	x						0.	0.	0.
DOUG DAVIS DIRECTOR OF OP	40.00			х	х			32,907.	0.	0.
ROBERT BROWN TREASUER	2.00	Х						0.	0.	0.
MARK GALLAGHER SECRETARY	2.00	Х						0.	0.	0.
RICH WINSON DIRECTOR	2.00	Х						0.	0.	_0.
BRIAN DORSETT DIRECTOR	2.00	X						0.	0.	0.
	-									

Fait VII Section A. Officers, Directors, Trus		ley				es,	alli			Jioyee		[.)
(A)	(B) Average	Posi	tion (c)	hat a	nnlv)	(D)	(E)	1 _	(F)	
Name and Title	hours per week			Officer		Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amo con f org ai	Estimated bunt of othe npensation from the ganization nd related ganizations	ì
	-											
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	•											
1 b Total								104,249.	0	<u>. </u>		0
2 Total number of individuals (including but not limited from the organization ►	l to thos	e list	ted a	abov	/e) \	who	rece	eived more than \$	100,000 in reportal	ole comp		
 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in For any individual listed on line 1a, is the sum of repthe organization and related organizations greater the individual 	dıvıdual	com	pen)? <i>[[</i>	•	•	.i. Ind comp	other			. 3	Yes	X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sch.	ompensa <u>edule</u> J	ation for s	froi uch	m ar	ny u s <i>on</i>	nrela	ated		services	5		Х
Section B. Independent Contractors									4100.000			
1 Complete this table for your five highest compensate compensation from the organization.	ed indep	ende	ent o	conti	ract	ors t	hat	received more tha	n \$100,000 of			
(A) Name and business addres	s							Description of	of Services	Compe	(C) ensation	
		•										
						<u>.</u>						
2 Total number of independent contractors (including t \$100,000 in compensation from the organization ▶	out not I	ımıte	ed to	tho	se I	ısted	d ab	ove) who received	more than			

Pai	t VIII Statement of Revenue					
, m, 3	· · · · · · · · · · · · · · · · · · ·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
TS, GRANTS	1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d	17,721.	,			, , , , , , , , , , , , , , , , , , ,
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 1f	428,469.		**************************************		e was
AND	g Noncash contribus included in lins 1a-1f: . \$ h Total. Add lines 1a-1f		446,190.			
	ii Totali / Ida iii ies Ta Ti	Business Code	***	2) ** * * * * * * * * * * * * * * * * *		1 2 3 7 7 7 9
로						
- 25	2a SPEAKING FEES	812990	35,186.	26,038.	9,148.	0.
- ₹	b CONFERENCES	812990	35,404.	35,404.	0.	0.
PROGRAM SERVICE REVENUE	c					
₹	·			<u> </u>		
စ္တို	f All other program service revenue .	_	70.500	\$\$\$\$\$.^\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		on! of help the home of the
<u> </u>	g Total. Add lines 2a-2f3 Investment income (including dividends		70,590.			
	other similar amounts)	•	405.	300.	105.	0.
	4 Income from investment of tax-exempt	bond proceeds				
	5 Royalties	<u> </u>				
	(i) Real	(iı) Personal	, s	P 33 . VEVS 1	W to Miles II	1 4 4 5 TO 10
	6a Gross Rents . 6,450		i 🐔 😘 🐰		()	1 4 - 5 2 5 1 2 4
	b Less: rental expenses				W. G. William .	
	c Rental income or (loss) 6,450		77.00 7.814			*. \$ () *
			C 450		C 450	
	d Net rental income or (loss)	() ()	6,450.	0.	6,450.	0.
	7a Gross amount from sales of assets other than inventory (i) Securities	(ii) Other	* 4 * 'î . *			۲,
	b Less: cost or other basis and sales expenses				÷ 34	, f
	c Gain or (loss)				* * * * * * * * * * * * * * * * * * * *	, ,
	d Net gain or (loss)	-				
J.	8a Gross income from fundraising events (not including \$					
OTHER REVEN	of contributions reported on line 1c).		,			
8	•	a				
¥	b Less: direct expenses	ь				
0	c Net income or (loss) from fundraising e	vents				
	9a Gross income from gaming activities See Part IV, line 19	a				
	b Less: direct expenses					
	c Net income or (loss) from gaming activ				······································	
		11165				
		a 174,612.				
	b Less: cost of goods sold	b 138,024.				
ļ	c Net income or (loss) from sales of inve		36,588.	36,58 <u>8</u> .	0.	0.
ļ	Miscellaneous Revenue	Business Code				
	11a					
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d		<u> </u>			1
			ECO 000	00 330	15 700	
	12 Total revenue. See instructions	<u> </u>	560,223.	98,330.	15,703.	0.

Part IX Statement of Functional Expenses

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

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

Do 1 6b, 1	not include amounts reported on lines 75, 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	- "			
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				
	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	74,342.	51,296.	23,046.	0.
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 .	219,715.	164,786.	54,929.	0.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	88,482.	65,477.	23,005.	0.
10	Payroll taxes	11,930.	8,828.	3,102.	0.
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting	8,951.	0.	8,951.	0.
d	Lobbying				
е	Prof fundraising svcs See Part IV, In 17		444	A Call	
f	Investment management fees				<u> </u>
g	Other .	27,068.	0.	27,068.	0.
	Advertising and promotion	8,194.	8,194.	0.	0.
	Office expenses .	75,848.	19,720.	56,128.	0.
14	Information technology		<u></u>		
15	Royalties				
16	Occupancy	18,395.	0.	18,395.	0.
	Travel	25,763.	19,065.	6,698.	0.
19	Conferences, conventions, and meetings	11,796.	8,729.	3,067.	0.
	Interest	12,471.	0.	12,471.	0.
21	Payments to affiliates	15,540.		15,540.	0.
22	Depreciation, depletion, and amortization.	9,724.		9,724.	0.
24	Insurance 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.)		0.	9,340.	0.
a b c					
е					
	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	617,559.	346,095.	271,464.	0.
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				5

BAA

Part X · Balance Sheet (B) End of year (A) Beginning of year 59,538 1 45,152. Cash - non-interest-bearing 0 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 1,372 4 2,209. Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L $\,$. 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) 6 and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 7 Notes and loans receivable, net 26,327 8 16,165. Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. 10a 266,437 Complete Part VI of Schedule D 158,302 10 c 150,002. b Less: accumulated depreciation 10b 116,435 11 Investments - publicly-traded securities 12 12 Investments - other securities. See Part IV, line 11 13 13 Investments - program-related. See Part IV, line 11 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11. . Total assets. Add lines 1 through 15 (must equal line 34) 213,528. 245,539 16 16 37,756. 17 49,460. 17 Accounts payable and accrued expenses . 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 22 Secured mortgages and notes payable to unrelated third parties . 23 113,303. 117,441 23 30,686 24 48,206. Unsecured notes and loans payable to unrelated third parties 25 Other liabilities, Complete Part X of Schedule D. 25 210,969. 26 Total liabilities. Add lines 17 through 25 185,883 26 Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34. 2,559. 59,656 27 27 Unrestricted net assets ... 28 Temporarily restricted net assets 29 Permanently restricted net assets õ Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, and equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 2,559. 59,656 33 Total net assets or fund balances. 213,528. Total liabilities and net assets/fund balances 245,539. 34 34

Form **990** (2009)

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

BAA

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.

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Employer identification number

Name o	ame of the organization Employer identification number											
HAR		ST PRAYER MI								05130		
Part	1	Reason for Pul	blic Charity Statu	s (All organizations	must c	comple	te this	part.)	See ii	nstruct	ions	
The o	rga	nization is not a priv	ate foundation becaus	e it is: (For lines 1 through	gh 11, cl	neck only	y one bo	x.)				
1	X	A church, convention	on of churches or asso	ciation of churches descr	ribed in s	section '	1 70(b)(1))(A)(i).				
2		A school described	ın section 170(b)(1)(A)(ii). (Attach Schedule E	.)							
3	П	A hospital or coope	rative hospital service	organization described in	n sectio	n 1 70 (b)	(1)(A)(iii).				
4	П	A medical research	organization operated	in conjunction with a ho	spital de	escribed	ın secti	on 1 70 (b)(1)(A)(iii). Ente	r the hospi	tal's
	_	name, city, and sta	te:									
5		An organization open 170(b)(1)(A)(iv). (C	erated for the benefit of complete Part II.)	of a college or university		•	-	-	nental u	nıt descr	ibed in sec	tion
6 7		An organization tha		overnmental unit describ substantial part of its sup art II)					or from t	he gener	al public d	escribed
8		A community trust of	described in section 1	70(b)(1)(A)(vi). (Complete	e Part II.)						
9												
10		An organization org	janized and operated	exclusively to test for pub	olic safet	y See s	ection 5	09(a)(4).			
11		An organization org more publicly suppo describes the type	ganized and operated orted organizations de organizations de of supporting organizations	exclusively for the benefit escribed in section 509(a ation and complete lines	t of, to p)(1) or s 11e thro	erform ti ection 50 ugh 11h	he functi 09(a)(2)	ions of, . See s e	or carry ection 50	out the 09(a)(3).	purposes of Check the	f one or box that
		a 🔲 Type I	b Type II	c 💹 Type III	I – Func	tionally	ıntegrate	ed		d []	Type III-	Other
е		By checking this bo than foundation ma 509(a)(2).	ox, I certify that the org inagers and other than	panization is not controlle one or more publicly sup	d directly pported	y or ındı organıza	rectly by itions de	one or scribed	more di in sectio	squalifie on 509(a	d persons)(1) or sec	other tion
f		If the organization r	received a written dete	ermination from the IRS t	hat is a ·	Type I, T	ype II o	r Type I	II suppo	rting org	anızatıon,	🗆
g		Since August 17, 20	006, has the organizat	ion accepted any gift or	contribu	tion from	n any of	the foll	owing pe	ersons?		
												Yes No
		(i) a person who	directly or indirectly of	ontrols, either alone or to apported organization?		with pers	sons des	cribed i	n (II) an	d (III)	11 g (i)	
		· · · · · · · · · · · · · · · · · · ·	ber of a person describer						•	•	11 g (ii)	
		``		described in (i) or (ii) ab	0.402				•	•	11 g (ii)	
h		• •		ne supported organization			•		•		119 (117)	<u> </u>
n		i) Name of Supported	Ĭ	(iii) Type of organization		lo ibo	GA Did ii	ou notify	4.5.1	s the	AdD Amoun	nt of Support
	,	Organization	(ii) EIN	(described on lines 1-9 above or IRC section (see Instructions))	organizat	is the tion in col d in your erning ment?	the organ	iization în (1) of	organizati (i) organiz U S	on in col 1	(VII) Allious	к от зарроге
					Yes	No	Yes	No	Yes	No		
			ļ			<u> </u>		-	_			
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Total												

Page 2 Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year (a) 2005 (c) 2007 (b) 2006 (d) 2008 (e) 2009 (f) Total beginning in) Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.') Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge Total. Add lines 1-through 3 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) į ′ Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total beginning in) Amounts from line 4. Gross income from interest. dividends, payments received on securities loans, rents. royalties and income form similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions). 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f) % 14 %_ 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 16a 33-1/3 support test - 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. . b 33-1/3 support test - 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. 17a 10%-facts-and-circumstances test - 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 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 organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. **b 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 organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization

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 HARVEST PRAYER MINISTRIES Part III - Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)

Sec	tion A. Public Support		•			7	
Cale	ndar year (or fiscal yr 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 'unusual grants ')						
	Gross receipts from						
-	admissions, merchandise sold or services performed, or facilities furnished in a 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						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						_
8	Public support (Subtract line	'9 \$3		૪	′ *		
	7c from line 6.)						
<u>Sec</u>	tion B. Total Support	,			T		
Cale	ndar year (or fiscal yr beginning in) 🟲	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
_	Add lines 10a and 10b Net income from unrelated business activities not included inline 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 ins 9, 10c, 11, and 12.)						
	First five years. If the Form 990 organization, check this box and	stop here		d, third, fourth, o		a section 501(c)(3)	▶□
Sec	tion C. Computation of Pu					·	
15	Public support percentage for 20		•	: 13, column (f))		. 15	%_
	Public support percentage from 2				<u> </u>	16	<u>%</u>
Sec	tion D. Computation of Inv						
17	Investment income percentage for	=		=	nn (f))	17	%
18	Investment income percentage fr					18	%_
	33-1/3 support tests — 2009. If the more than 33-1/3%, check this be	ox and stop here.	The organization	qualifies as a pul	blicly supported or	ganızatıon	. •
	33-1/3 support tests – 2008. If the is not more than 33-1/3%, check	this box and stop	here. The organiz	zation qualifies as	s a publicly suppor	ted organization	and line 18
20_	Private foundation. If the organiz	ation did not ched		-			
RAA			TEFAMOS	02115110	9	nedule A /Form QC	10 or 990-F71 2009

Schedule	A (Form 990 or	990-EZ) 2009	HARVEST	PRAYER	MINISTRIE	S	35-1905130	Page 4
Part IV	Suppleme Part II, lin	e <mark>ntal Informa</mark> e 17a or 17b	tion. Comple; and Part II	ete this p I, line 12.	art to provide Provide any	the explanations rother additional in	equired by Part II, Iir formation. See instru	ne 10; ctions.
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

Open to Public Inspection

Name of the organization	Employer identification number
HARVEST PRAYER MINISTRIES	35-1905130
Pt VI-B, Line 11A FORM 990 IS REVIEWED BY BOARD AT REGULAR MEETIN	IG_BEFORE MAILED
Pt_VI-B, Line 15 ALL COMPENSATION IS REVIEWED AND APPROVED BY KE	Y_OFFICERS
	· -
	

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

CONCERT OF PRAYER AND DEVELOPING / GATHERING RESOURCES PERTAINING

TO PRAYER AND WORLD EVANGELISM