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990 Form

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

2009

Departr	nent of	the Treasury	İ.			Open to Public
		nue Service		The organization may have to use a copy of this return to satisfy state reporting		Inspection
A F	or the	2009 calendar	year, or	tax year beginning , 2009, and ending	<u> </u>	, 20
B Ch	neck if a	applicable	Please use IRS	C Name of organization PRAY AMERICA		D Employer identification no.
L Ac	ldress (	change	label or print or	Doing Business As		38-1992182
$\equiv$	ime cha	ange	E Telephone number (517) 622-1085			
Те	minate		Specific Instruc-	City or town, state or country, and ZIP + 4		G Gross receipts
An	nended	return	tions.	LANSING, MI 48901		\$ 737,005
□ Ap	plication	on pending	F Name	and address of principal officer RON MORIN		
				OX 14070, LANSING, MI 48901	I(a) Is this a group r affiliates?	etum for Yes X No
I Ta	x-exen	npt status X	501(c) (	3 ) ◀ (insert no )	(b) Are all affiliates	included? Yes No
J W	ebsite:	www.	prayar	erica.org H	(c) Group exemption	n number
K Fo	rm of c	organization X C	Corporation	Trust Association Other ► L Year of formation 2003	M State of le	gal domicile MI
Par	t I	Summary	•			
	1	Briefly describ	e the org	anization's mission or most significant activities CHRIST CENTERED 1	MINISTRY CO	MMITTED TO CARING
		FOR THE MA	ARGINA	LIZED PEOPLE OF GUATEMALA.		
¢ G						
t o i y						
Vе	2	Check this box	x ▶∐_!1	the organization discontinued its operations or disposed of more than 25% of its	1	ı
t n	3		•	bers of the governing body (Part VI, line 1a)	3	
e n	4	Number of Ind	lepender	t voting members of the governing body (Part VI, line 1b)	4	-
s c	5		•	yees (Part V, line 2a) · · · · · · · · · · · · · · · · · · ·	5	<del></del>
&	6			eers (estimate if necessary) · · · · · · · · · · · · · · · · · · ·	6	
	ı	-	Den.	rusiness revenue from Part VIII, column (C), line 12	· · · · · ·   78	
	b	Net unrelated	busines	taxable income from Form 990-T, line 34 · · · · · · · · · · · · · · · · · ·	•••• 7t	
R				RECEIVED	Prior Year	Current Year
e	8			ts (Part Vm-line In).	1,129,58	8 712,496
e	9	-	# (CON )	ue (Part VIII, line 2g)		0
n	10	Investment inc	come (Pa	int Viti Scotum (A) plunes 3 9 and 7d)	1,50	
e	11			th column (A), lines 5, 6d, 8d 9c, 10c, and 11e)	(1,33	
	12			bunts paid (Part M, Column (A), lines 1-3)	1,129,75	7 737,005
	13 14			nembers (Part IX, column A), line 4)	<u> </u>	
E	15	•		isation, employee benefits (Part IX, column (A), lines 5-10)	7,92	9,582
X P			•	g fees (Part IX, column (A), line 11e)		9,302
e n	l			nses (Part IX, column (D), line 25) ▶ 20,780		
S	17		• .	X, column (A), lines 11a-11d, 11f-24f)	1,157,82	6 714,999
s	18	•		nes 13-17 (must equal Part IX, column (A), line 25)	1,165,75	
	19	•		s Subtract line 18 from line 12 · · · · · · · · · · · · · · ·	(35,99	
Net		TKC VCHICC ICSS	CAPCITION		ning of Current Year	End of Year
Assets	20	Total assets (F	Part X III		357,64	
or Fund	21	Total liabilities	•	, , , , , , , , , , , , , , , , , , ,	198,15	<del></del>
Bal- ances	22		•	nnces Subtract line 21 from line 20 · · · · · · · · · · · · ·	159,48	_ <del> </del>
Par		Signature		· · · · · · · · · · · · · · · · · · ·		
1		Under penalties	of perjury	I declare that I have examined this return, including accompanying schedules and statements, and to		
Ĭ		and belief, it is t	true corcec	t, and complete Declaration of preparer (other than officer) is based on all information of which prepare	er has any knowledg	
Sign				mom	1	7-22-201
Here	,	Signature	of officer			ate
) )			07	AMES W MORIN TBEASURER	>	
IJ		Type or pr	nnt name a			
		Preparer's		Date Check if	1 '	dentifying number
Daid		signature	1	self- employed	►X (see instruc	aions)
Paid Prepa	rer'e			act 200 pt 07-16-2010		
Use O		Firm's name (or	r vours	Karl L Drake PC EIN	<b>&gt;</b>	
	•	if self-employed	i),	3775 Kimmel Road		
		address, and Zi	IP + 4	Horton, MI 49246 Pho	one no ►517-9	
March	- ID	O d	Of 150 1406	the preparer shown above? (see instructions)		V Vos No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

_	990 (2009) PRAY AMERICA	38-1992182	Page
	rt III Statement of Program Service Accomplishments		
1 `	Briefly describe the organization's mission CHRIST CENTERED MINISTRY COMMITTED TO CARING FOR THE MARGINALIZED PEOPLE OF GU .	ATEMALA.	
2	Did the organization undertake any significant program services during the year which were not listed on		
_	the prior Form 990 or 990-EZ?	· · · · · TYes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	· · · · · _ Yes	X No
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expense Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grant allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 651,602 including grants of \$) (Revenue HOLISTIC APPROACH TO MINISTRY INCLUDING FEEDING PRGRAMS, HOUSING CONSTRUCTION,		)
	EDUCATION AND INTERCESSORY PRAYER		
4b	(Code) (Expenses \$) (Revenue	\$	)
		·	
		·	
4c	(Code) (Expenses \$ including grants of \$) (Revenue	\$	)
4d	Other program services (Describe in Schedule O )		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	···

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_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_	X	
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		X
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 Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
4.4	quasi-endowments? If "Yes," complete Schedule D, Part V	10		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 • • • • • • • • • • • • • • • • • • •	44		
		11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	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			
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	Х	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional · · · · · · · · · · · · · · · · · · ·			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
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		X
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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

Pa	rt 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		X
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		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV · · · · · · · · · · · · · · · · · ·	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a		i	
	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		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	:		
•	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Parti	31		_ <u>X</u> _
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II			
22	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		X
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		.,
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	- 33		_ X
<b></b>	III, IV, and V, line 1 · · · · · · · · · · · · · · · · · ·	34		v
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	-34		X
00	Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · ·	35		v
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	- 55		<u>X</u>
-	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	- 55		
٠,	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	<del></del>		
	19? <b>Note</b> . All Form 990 filers are required to complete Schedule O	38	х	

Part V Statements Regarding Other IRS Filings and Tax Compliance

-			Yes	No
1a	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		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable • • • • • • • • • • • • • • • • • • •	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners? • • • • • • • • • • • • • • • • • • •	1c	ļ	
2a				
	Statements, filed for the calendar year ending with or within the year covered by this return • • • • • • 2a 0	_	ļ	
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
_	instructions)			İ
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	١.		l
	this return? · · · · · · · · · · · · · · · · · · ·	3a	ļ	<u> X</u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	-	
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)? • • • • • • • • • • • • • • • • • • •	4-		١
	·	4a	<del> </del>	<u> </u>
D	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?	5a		١,,
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	+	X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	- 55	-	X
Ū	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	<del> </del>	<del>                                     </del>	-
	organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible? • • • • • • • • • • • • • • • • • • •	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			1
	required to file Form 8282? · · · · · · · · · · · · · · · · · · ·	7с		
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 on a personal			
_	benefit contract?	7ө		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<u> </u>	ļ
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u> </u>	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? • • • • • • • • • • • • • • • • • • •			
		7h	<u> </u>	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		-	
9	Sponsoring organizations maintaining donor advised funds.	8	-	<del> </del>
	Did the organization make any taxable distributions under section 4966?	92		
a b	Did the organization make any taxable distributions under section 49667	9a 9b	+	
10	Section 501(c)(7) organizations. Enter	- <del>3</del> 5	$\vdash$	-
а	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·	1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter	1		
· ·	Gross income from members or shareholders · · · · · · · · · · · · · · · · · · ·			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
-	amounts due or received from them ) · · · · · · · · · · · · · · · · · ·			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1	1
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year · · · · · · · ·   12b			

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 · · · · · · · · · · · · · · · · · · 1a 4			
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	X	
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		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? • • • • •	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets? • • • • • • • • • • • • • • • • • • •	5		Χ
6	Does the organization have members or stockholders?	6		Χ
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body? • • • • • • • • • • • • • • • • • • •	8a	х	
b	Each committee with authority to act on behalf of the governing body? • • • • • • • • • • • • • • • • • • •	8b	Х	
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	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal			
	enue Code )			
			Yes	No
I0a	Does the organization have local chapters, branches, or affiliates?	10a		X
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		
1	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11		Х
l1a	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
2a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		_	
а	The organization's CEO, Executive Director, or top management official	15a		Х
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
l6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year? • • • • • • • • • • • • • • • • • • •	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		_ ]	
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization JAMES MORIN (517) 622-1085			
	PO BOX 14070 LANSING, MI 48901			

# 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

(A)	(B)				C)			(D)	<b>(E)</b>	(F)
Name and Title	Average hours per week	Position I to did nor i se vot con i e to de oou or			K e y e	H c e I o m g m p h p I e e o	Form	from the	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the
		deo u r ao l r	t e u e t l o n a l	c e r		s n s e e e e e e	r	organization (W-2/1099-MISC)	(W-21099-MISC)	organization and related organizations
RON MORIN										
PRESIDENT	40.00			X			1	1	o o	0
MIKE MORIN										
VICE PRESIDENT	5.00	ĺ		X						
JAMES MORIN										
TREASURER	5.00			X		L	<u> </u>			
WILLIAM CONKLIN										
SECRETARY	5.00	ļ		X						
	+	-								
			_	-			-			
	-									
	1	<del> </del>	-	-		-				
						-			-	

Pa	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	. (A)	(B) (C)							(D)	(E)		_	
	Name and Title	Average hours per week	l t d	l t	P	K	H c e	F	Reportable compensation from	Reportable compensation from related	a	stimated imount of other	f
			dur usec veto de r de r l	t t t e t i o n a	cer	emp-oyee	g mp I e e o y t a e t e d	m e r	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	oi	mpensati from the ganization nd relate ganization	e on ed
-													
			_										
-													
						i							
			_	-									
				-									
			-										
1b	Total	• • • • •	• • •	• •	• •	• •	• • •	<b></b>	0	0	1		0
2	Total number of individuals (including but not limited to reportable compensation from the organization	those listed	above	e) w	ho re	ecen	ved mo	ore t	han \$100,000 ın	0			
	reportable compensation from the organization											Yes	No
3	Did the organization list any former officer, director or employee on line 1a? If "Yes," complete Schedule J fo	-				-		-			. 3		x
4	For any individual listed on line 1a, is the sum of repor	•											
	the organization and related organizations greater that								J for such				
5	Did any person listed on line 1a receive or accrue com								n for		4	<del> </del>	X
	services rendered to the organization? If "Yes," complete	-		-			-				5		х
Sec 1	tion B. Independent Contractors Complete this table for your five highest compensated	ındependen	t contr	acto	rs th	at r	eceive	d me	ore than \$100,000	of			
	compensation from the organization												
	(A) Name and business address	_							(B) Description of s	ervices	Comp	(C) ensation	ì
2	Total number of independent contractors (including but more than \$100,000 in compensation from the organization)		to thos	e lis	sted	abo	ve) wh	o re	ceived				

Part \	VIII	Statement of Revenue				<u> </u>	l
•				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated business	Revenue excluded from tax
	•				function revenue	revenue	under sections 512, 513, or 514
	1a	Federated campaigns · · · · · · 1a					
	ь	Membership dues · · · · · · · 1b					
Contri- butions,	c	Fundraising events · · · · · · · 1c					
gifts,	d	Related organizations · · · · · · · 1d					
grants	e	Government grants (contributions) · · 1e					
and other	f	All other contributions, gifts, grants,					
similar	•	and similar amounts not included above 1f	712,496				
amounts	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		712,496			
	_		Business Code				
	2a			-	- <u>-</u>	-	-
	ь			-			
Program	c						
Service Revenue	d						
	e			-			
		All other program service revenue · · · · · ·					
		Total. Add lines 2a-2f					
						<u>-</u>	
	3	Investment income (including dividends, interest, an other similar amounts)	° ▶	g	g		
	4	Income from investment of tax-exempt bond proceed					
	5	Royalties					
		(i) Real	(II) Personal			······································	
	6a	Gross Rents	(II) Personal				
		Less rental expenses · · · ·			1		
		Rental income or (loss) · · · 24,500	-		İ		
	ľ	Net rental income or (loss) · · · · · · · · ·		24,500	24,500	÷ ÷	
	1	` ' [	(II) Other		21,200		
	/a	Gross amount from sales of (i) Securities assets other than inventory	(II) Outer				
		Less cost or other basis and sales expenses			İ		
0	۰.	Gain or (loss)					
h		` '		-			
е		Gross income from fundraising			<u>-</u>		
Г		events (not including \$					
R		of contributions reported on line 1c)					
е		See Part IV, line 18 · · · · · · · · a					,
ė	Ь	Less direct expenses · · · · · · · b					
n		Net income or (loss) from fundraising events ••					
u e		Gross income from gaming activities					
	~~	See Part IV, line 19 · · · · · · · · a					
	Ь	Less direct expenses · · · · · · · b					
		Net income or (loss) from gaming activities · · ·				-	
		Gross sales of inventory, less	-		· · · · · · · · · · · · · · · · · ·		<del> </del>
	'Ua	returns and allowances · · · · · · · a					
	Ь	Less cost of goods sold · · · · · · · b					
		Net income or (loss) from sales of inventory · · ·					
	一	······································	Business Code			-	
	11a						,
	ь						·
	c			-			
	-	All other revenue		-			
	1	Total. Add lines 11a-11d · · · · · · · · ·					
	ŀ	Total revenue. See instructions	🏲	737,005	24,509	C	0

38-1992182

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	n (A) but are not requi	red to complete colum	nns (B), (C), and (D).	
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to governments and		expenses	general expenses	expenses
•	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 · · · · · · · ·				
4	Benefits paid to or for members				<del></del>
5	Compensation of current officers, directors,				
•	trustees, and key employees · · · · · · · · · ·				
6	Compensation not included above, to disqualified				<u></u>
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B) · · · · ·				
7	Other salaries and wages	,	<u>-</u>		<del></del>
8	Pension plan contributions (include section 401(k)				
-	and section 403(b) employer contributions) · · · · ·				
9	Other employee benefits	9,582	7,666	958	958
10	Payroll taxes · · · · · · · · · · · · · · · · · · ·	, -			<u> </u>
11	Fees for services (non-employees)				
а	Management				
b	Legal · · · · · · · · · · · · · · · · · · ·				
c	Accounting	7,300		7,300	
d	Lobbying · · · · · · · · · · · · · · · · · · ·	,			
е	Professional fundraising services See Part IV, line 17 -				· ···- · ·
f	Investment management fees · · · · · · · · · ·				
g	Other	10,600		10,600	
12	Advertising and promotion • • • • • • • • • • • • • • • • • • •	2,171			2,171
13	Office expenses · · · · · · · · · · · · · · · · · ·	3,930		2,592	1,338
14	Information technology · · · · · · · · · · · · ·				•
15	Royalties · · · · · · · · · · · · · · · · · · ·				
16	Occupancy · · · · · · · · · · · · · · · · · · ·			·	
17	Travel · · · · · · · · · · · · · · · · · · ·	5,424	4,338	543	543
18	Payments of travel or entertainment expenses	,			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings · · · · · ·				·
20	Interest	15,014		15,014	
21	Payments to affiliates • • • • • • • • • • • • • • • • • • •				<del></del>
22	Depreciation, depletion, and amortization · · · · · ·	8,921		8,921	
23	Insurance · · · · · · · · · · · · · · · · · · ·	1,832		1,832	
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	COORDINATION	15,770			15,770
b	MANOS DE JESUS	573,613	573,613		· -
c	GROUP EXPENSES	53,398	53,398		
d	GOD GUIDES	12,087	12,087		
е	GUATEMALA - OTHER	500	500		<del></del>
f	All other expenses · · · · · · · · · · · · · · · · · ·	4,439		4,439	
25	Total functional expenses. Add lines 1 through 24f · ·	724,581	651,602	52,199	20,780
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 · · · · · · · · · · · · · · · · · · ·				
	randralating constitution is a second			·	Form <b>990</b> (2009)

Part X	Balance Sheet	(A)	Т Т	(B)
	•	Beginning of year		End of year
1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·	71,332	1	86,488
1	Savings and temporary cash investments · · · · · · · · · · · · · · · · · · ·	2,261	2	00,400
3	Pledges and grants receivable, net	2,201	3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key		*	
"				
	employees, and highest compensated employees. Complete Part II of Schedule L	-	5	
	<b>-</b>		3	
6	Receivables from other disqualified persons (as defined under section		1 1	
A	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete  Part II of Schedule L			-
S			6	
S 7	Notes and loans receivable, net		7	
t 8	Inventories for sale or use		8	· -
s 9	Prepaid expenses and deferred charges		9	
10a				
	other basis Complete Part VI of Schedule D · · · · · 10a 339,119		I	
		284,048	10c	282,913
11	Investments - publicly traded securities		11	<del> </del>
12	Investments - other securities See Part IV, line 11 · · · · · · · · · · · · · · · · · ·		12	
13	Investments - program-related See Part IV, line 11		13	
14	Intangible assets • • • • • • • • • • • • • • • • • • •		14	- <del>-</del>
15	Other assets See Part IV, line 11 · · · · · · · · · · · · · · · · · ·		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	357,641	16	369,401
17	Accounts payable and accrued expenses	7,574	17	1,963
18	Grants payable · · · · · · · · · · · · · · · · · · ·		18	
L   19	Deferred revenue · · · · · · · · · · · · · · · · · · ·		19	
a 20	Tax-exempt bond liabilities • • • • • • • • • • • • • • • • • • •		20	
ь 21	Escrow or custodial account liability Complete Part IV of Schedule D · · · · · · ·		21	
22	Payables to current and former officers, directors, trustees, key			
i	employees, highest compensated employees, and disqualified			
t	persons Complete Part II of Schedule L		22	
e 23	Secured mortgages and notes payable to unrelated third parties · · · · · · · ·	190,580	23	195,527
s 24	Unsecured notes and loans payable to unrelated third parties • • • • • • • • • • •		24	
25	Other liabilities Complete Part X of Schedule D · · · · · · · · · · · · · · · L		25	
26	Total liabilities. Add lines 17 through 25	198,154	26	197,490
	Organizations that follow SFAS 117, check here ▶ 🗓 and			
F	complete lines 27 through 29, and lines 33 and 34.			
u 27	Unrestricted net assets	159,487	27	171,911
n d 28	Temporarily restricted net assets · · · · · · · · · · · · · · · · · [		28	
29	Permanently restricted net assets		29	
B a	Organizations that do not follow SFAS 117, check here			
וֹ	and complete lines 30 through 34.			
a 30	Capital stock or trust principal, or current funds	-	30	• -
n c 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
е 32	Retained earnings, endowment, accumulated income, or other funds		32	
S 33	Total net assets or fund balances	159,487	33	171,911
34	Total liabilities and net assets/fund balances	357,641	34	369,401

Form	990 (2009) PRAY AMERICA	38-1992182		Pa	age 1
Par	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 methods of accounting from a prior year or checked "Other," explain in	ŀ			l
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
b	Were the organization's financial statements audited by an independent accountant?	[	2b	Х	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant? •••••		2c		x
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O		ĺ		l
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				İ
	issued on a consolidated basis, separate basis, or both	ŀ			
	Separate basis Consolidated basis Both consolidated and separate basis				1
3a .	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		İ		Ī

EFA

the Single Audit Act and OMB Circular A-133? ......

**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

Form 990 (2009)

3b

#### 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 Name of the organization

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

Employer identification number

PRAY AMERICA 38-1992182 Reason for Public Charity Status (All organizations must complete this part ) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I c Type III-Functionally integrated Type III-Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (iii) below, the governing body of the supported organization? ...... 11g(i) 119(8) (iii) A 35% controlled entity of a person described in (i) or (ii) above? ........... 11g(iii) Provide the following information about the supported organization(s) h (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section governing document? col (i) of your (i) organized in the US? (see instructions) ) support? Nο Yes Yes No Yes No Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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 beginning in) (a) 2005 (b) 2006 (c) 2007(d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 530,337 735,189 771,988 1,129,588 736,996 3,904,098 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . . . . . . . . . . . . . . The value of services or facilities furnished by a governmental unit to the organization without charge 3,904,098 530,337 735,189 771,988 1,129,588 736,996 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) 3,904,098 Public support. Subtract line 5 from In 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 530,337 735,189 771,988 1,129,588 736,996 3,904,098 Amounts from line 4 · · · · · Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar (2,764)(10,216)623 169 (12, 179)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) . . . . . . . 3,891,919 11 Total support. Add lines 7 through 10 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 100.31 % % 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► X 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 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 17a 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 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

	ction A. Public Support					<del></del>	
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include						
2	any "unusual grants ") · · · · · · · · · · · · · · · · · ·			<u> </u>	-		
•	dise sold or services performed, or fac- lities 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 bus under sec 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 • • • •				<del> </del>		
	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 · · · · · · · [						
8	Public support (Subtract line 7c from line 6) · · · · · · · · · · · · · · · · · ·						
	ction B. Total Support	<del></del>	T	1	1		
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	Amounts from line 6						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 11	Add lines 10a and 10b · · · · · · · · · · · · · · · · · · ·						
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 the orgorganization, check this box and stop here	anızatıon's first,	second, third, fourt	h, or fifth tax year	as a section 501(c)	)(3)	▶□
	ction C. Computation of Public Sup						
15	Public support percentage for 2009 (line 8, co		•	(17)			
16	Public support percentage from 2008 Schedu		· .			16	9
<u>Se</u> 17	ction D. Computation of Investmer Investment income percentage for 2009 (line			oolumn (A)		17	
17 18	Investment income percentage for 2009 (line Investment income percentage from 2008 Sci		•			18	<u>-</u> 9/
	·					1	
	33 1/3% support tests - 2009. If the organizat 17 is not more than 33 1/3%, check this box a 33 1/3% support tests - 2008. If the organizat	ind <b>stop here.</b> Ti ion did not checl	he organization qu k a box on line 14 d	alifies as a publicly or line 19a, and line	y supported organi e 16 is more than 3	zation • • • • • • • • • • • • • • • • • • •	· · · · · ▶ □
20	line 18 is not more than 33 1/3%, check this b	~	•	•		•	••••••
20	Private Foundation: If the organization did no	от спеск а рох ог	1 line 14, 19a, or 19	D, Check this box	and see instruction	1S • • • • •	

#### **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.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Inspection

PRA	AY AMERICA	38-1992182
Par		
	the organization answered "Yes" to Form 990, Part IV, line 6	
	(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 donor advisors in writing that the assets held in donor advised	<del></del>
	funds are the organization's property, subject to the organization's exclusive legal control? • • • • • • • •	· · · · · · · · · · · · · · · · · · ·
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be	
	used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other	
	purpose conferring impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·
Par	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part I	V, line 7
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
	Preservation of land for public use (e.g., recreation or pleasure)	y important land area
	Protection of natural habitat Preservation of a certified his	storic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a contribution of a contributio	nservation
	easement on the last day of the tax year	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06 · · · · · · · · · · · · · ·	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	ization during
	the tax year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	_
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the	e year
_		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	ar
_	<b>\\$</b>	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense stater	'
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that	at describes
<u> </u>	the organization's accounting for conservation easements	Oinsiles A4-
<u>Par</u>	organizations Maintaining Collections of Art, Historical Treasures, or Oth Complete if the organization answered "Yes" to Form 990, Part IV, line 8	ier Similar Assets.
1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance :	sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance	
	provide, in Part XIV, the text of the footnote to its financial statements that describes these items	or public scrylec,
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet	et works of art
-	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	
	provide the following amounts relating to these items	pasiio 5077100,
	(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 works of art, historical treasures, or other similar assets for financial gain,	
	following amounts required to be reported under SFAS 116 relating to these items	F. 2 - 200
а	Revenues included in Form 990, Part VIII, line 1 · · · · · · · · · · · · · · · · · ·	<b>&gt;</b> \$
	·	· · <del> </del>

	_	_				
0) 2009	PRAY AMERICA				38-19921	
	zations Maintaining					sets (continued
-	n's acquisition, accession,	, and other records, c	neck any of the foll	owing that are a sign	ificant use of its	
•	ck all that apply)	<b>.</b>				
exhibition		==	or exchange prog	rams		
rly researc		e Othe	er			
	future generations					
description	of the organization's colle	ections and explain he	w they further the	organization's exemp	t purpose in	
		_				
	he organization solicit or re					
	aise funds rather than to b					· Yes
Escrow	and Custodial Arra	angements. Com	iplete if organizatio	n answered "Yes" to	Form 990,	
	ne 9, or reported an amour				·	
	n agent, trustee, custodian					
	0, Part X?				• • • • • • • • •	·   Yes
plain the a	irrangement in Part XIV an	id complete the follow	ving table		·-r	
					Amo	unt
					С	
	year · · · · · · · · · · · · ·				d	
	he year · · · · · · ·				е	
					f	
anızatıon ı	include an amount on Forr	m 990, Part X, line 21	?		• • • • • • • • • •	· Yes _
	rrangement in Part XIV					
<u>Endown</u>	nent Funds. Complete	if the organization ar	swered "Yes" to F	orm 990, Part IV, line	10	
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years bad
of year bal	lance · · · · · · · ·					
ns · · ·						
	ngs, gains, and losses •					
cholarship	os					
	or facilities					
tive expen	ses · · · · · · · ·					
•				1		<b>———</b>

-3	Using the organization's acquisition, accession	, and othe	record	s, check any c	or the lollo	wing that are	a signiii	cant use or its			
	collection items (check all that apply)										
а	Public exhibition	d	[ ] L	oan or exchai	nge progra	ams					
b	Scholarly research	0	c	Other					_		
С	Preservation for future generations										
4	Provide a description of the organization's colle	ctions an	d explair	n how they fur	ther the or	ganization's	exempt <sub>l</sub>	ourpose in			
	Part XIV										
5	During the year, did the organization solicit or re	eceive do	nations	of art, historica	al treasure	s, or other si	mılar				
	assets to be sold to raise funds rather than to b								🗆	Yes [	No
Pa	rt IV Escrow and Custodial Arra										
LLA	Part IV, line 9, or reported an amount	nt on Form	n 990, P	art X, line 21	•			·			
1a	Is the organization an agent, trustee, custodian				outions or	other assets	not				
	included on Form 990, Part X? · · · · ·								🗆	Yes [	No
b	If "Yes," explain the arrangement in Part XIV ar									[	
~	in 100, explain the arrangement in tale xit at	ia compio					F	T Am	nount		
_	Beginning balance						· · 1c	1			
c d	Additions during the year · · · · · · · · ·						1d				
	Distributions during the year · · · · · ·						1e	+			
e	Ending balance · · · · · · · · · · · · · · · · · · ·						16				
f								<u> </u>		Yes	No
2a	Did the organization include an amount on For	m 990, Pa	ın X, iine	:21/			• • • •		•• □	ies [	
_ <u>b</u>	If "Yes," explain the arrangement in Part XIV			1.10		200 5 11					
Pa	rt V Endowment Funds. Complete	the org	anization	n answered "Y	es" to For						
_		(a) Cur	rent year	(b) Pric	or year	(c) Two years	s back	(d) Three years back	(e) Fou	ır years b	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses •										
d	Grants or scholarships · · · · · · · · · · · ·										
ө	Other expenditures for facilities						ļ				
	and programs · · · · · · · · · · · · · · · · · · ·										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the year e	nd baland	æ held a	ıs							
а	Board designated or quasi-endowment		%								
b	Permanent endowment ▶ %		_								
С	Term endowment ▶ %										
3a	Are there endowment funds not in the possess	on of the	organiza	ation that are I	held and a	dministered t	for the				
	organization by		•							Yes	No
	(i) unrelated organizations · · · · · · · ·								- 3a(i)		
	(ii) related organizations · · · · · · · · ·								- 3a(ii)		
ь	If "Yes" to 3a(ii), are the related organizations li		equired o	n Schedule F	??				. 3b		
4	Describe in Part XIV the intended uses of the o		•								L
Ē						190 Part Y III	ne 10				
Pa		_	_	-		ľ					
	Description of investment	(		other basis		t or other		Accumulated	(d) Bo	ok value	
	Land · · · · · · · · · · · · · · · · · · ·		(inve	stment)	basis	(other) 34,200	d€	epreciation		- 34	,200
1a		$\cdots$ $\vdash$			<del>-</del>	285,800		54,613			,187
b	Buildings · · · · · · · · · · · · · · · · · · ·	· · · ·			_	203,000		34,613		231	, 10/
C	Leasehold improvements · · · · · · · · · · · · · · · · · · ·					10 110		1 500			E0.
d	Equipment · · · · · · · · · · · · · · · · · · ·	•••∟				19,119		1,593		17	,52€

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) )

Schedule D (Form 990) 2009

282,913

PRAY AMERICA

Part VII	Investments - Other Securities.	See Form 990, Part X, line 12	<u>-</u>	
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuati Cost or end-of-year marke	
Financial deri	vatives · · · · · · · · · · · · · · · · · · ·			
Closely-held	equity interests			
Other				
				· <u> </u>
				· <del>-</del>
		<del></del>		
Total (Column	(b) must equal Form 990, Part X, col (B) line 12)	<del>                                     </del>		
Part VIII	Investments - Program Related.	See Form 990, Part X, line 13		
I ait viii		(b) Book value	(a) Atlathad of valuation	<del></del>
	(a) Description of investment type	(D) Book value	(c) Method of valuati Cost or end-of-year marke	
				<u>.                                    </u>
		<del>                                     </del>		
	,			
	b) must equal Form 990, Part X, col (B) line 13)	<u> </u>		
Part IX	Other Assets. See Form 990, Part X, line			
	(a)	Description		(b) Book value
	···-			
	<del></del>			<del></del>
			· ·	
	n (b) must equal Form 990, Part X, col. (B) line 1		• • • • • • • • • • • • •	·
Part X	Other Liabilities. See Form 990, Part X, I	ine 25		
1	(a) Description of liability	(b) Amount	4	
Federal incon	ne taxes		<u> </u>	
			-	
			1	
		<del></del>	1	
			†	
			1	
			1	
			1	
Total. (Column	b) must equal Form 990, Part X, col (B) line 25)			
	otnote In Part XIV, provide the text of the footnote	e to the organization's financial sta	atements that reports the	
organization's	liability for uncertain tax positions under FIN 48			

Sched	ule D (Form 990) 2009 PRAY AMERICA	38-1992182	Page 4
Рa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statement	s	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	737,005
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	724,581
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	12,424
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses · · · · · · · · · · · · · · · · · ·	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV )	8	
9	Total adjustments (net) Add lines 4 through 8 · · · · · · · · · · · · · · · · · ·	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	12,424
Pa	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return	<del></del>
1	Total revenue, gains, and other support per audited financial statements	1	737,005
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		·
а	Net unrealized gains on investments · · · · · · · · · · · · · · · · · 2a		
b	Donated services and use of facilities • • • • • • • • • • • • • • • • • • •		
С	Recoveries of prior year grants	<b>-</b>	
d	Other (Describe in Part XIV )	-	
ө	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·		
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	737,005
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	<del> </del>	i
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
ь	Other (Describe in Part XIV ) · · · · · · · · · · · · · · · · · ·		
С	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	737,005
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		<u> </u>
1	Total expenses and losses per audited financial statements		724,581
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities · · · · · · · · · · · · · · · 2a		
b	Prior year adjustments · · · · · · · · · · · · · · · · · · ·	$\dashv$ $\mid$	
c	Other losses · · · · · · · · · · · · · · · · · ·	$\dashv$ 1	
d	Other (Describe in Part XIV ) · · · · · · · · · · · · · · · · · ·	$\dashv$	
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	<sub>2e</sub>	
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	724,581
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · · 4a		
b	Other (Describe in Part XIV ) · · · · · · · · · · · · · · · · · ·	-	
c	Add lines 4a and 4b	→ <sub>4c</sub>	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	724,581
_			7247502
	rt XIV   Supplemental Information  plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 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 and 4b Also complete		
	part to provide any additional information		
	ant to provide any additional minimation.	<del></del>	
<b>∩+</b> 1	ner revenues included on Form 990 (Part XII, line 4b)		
<u> </u>	iel levenues included on rolm 330 (rait All, line 4D)		
Ren	tal expenses of \$27,334		
	··· <u>··································</u>		
	<del></del>	<del></del>	
	<del> </del>		
	<del></del>	<u></u>	<del></del>

Signedule D (Form 990) 2009 PRAY AMERICA	38-1992182	Page 5
Part XIV Supplemental Information (continued)		
•		
02. Other expenses included on Form 990 (Part XIII, line 4b)		
Rental expenses totalling \$27,334.		
Concert Compenses Conterring V2.7554.	<del></del>	
		-
	- <del></del>	
	-	
		<del></del>
	<del></del>	
		-

#### **iSCHEDULE O** •(Form 990)

#### Supplemental Information to Form 990

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

OMB No 1545-0047 2009

Department of the Treasury Internal Revenue Service Name of the organization

PRAY AMERICA

Attach to Form 990.

Open to Public Inspection Employer identification number

38-1992182

01. Officer, directors, etc. family relationship (Part VI, line 2)
Board members Ron Morin, Mike Morin, and James Morin are brothers.
02. Form 990 governing body review (Part VI, line 11)
Form 990 is reviewed and signed by one of the Board members.
03. Governing documents, etc, available to public (Part VI, line 19)
All governing documents and form 990 are available by contacting any member of the Board
of Directors. Copies are made available upon request.