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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

Open to Public

OMB No 1545-0047

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

Inspection

<u>A</u>	For the	ne 2009 calendar year, or tax year beginning and endir	ng							
В	Check	dentifi	ication number							
	applica	use IRS FACE FOUNDATION FOR ADVANCEMENT								
	Add:	ress label or OF CHRISTIAN EDUCATION	1							
	Nam char	le type Doing Business As		45-0338 <u>2</u> 71						
	linitia retur	n See Number and street (or P.O dox if mail is not delivered to street address) Hoom	n/suite	E Telephone r						
	Term	In- Specific DO DOY 1/32	1)252-1178				
		nded tions Chinaratan etata a constant and 710 . 4		G Gross receipts		213,439.				
	Appl			H(a) is this a g						
	pend	F Name and address of principal officer: JOAN MORRIS		for affiliate	•	☐ Yes X No				
, JAMESTOWN, ND 58401 H(b) Are all affiliates included? Yes										
1	Tax-ex	xempt status X 501(c) (3				cluded? Yes No list (see instructions)				
		ite: FACELEGACY. ORG		H(c) Group exe		·				
						A State of legal domicile: ND				
	art I	Summary		1011110111. 23	<u>· · · · · · · · · · · · · · · · · · · </u>	N Otato Of Togar Communic, 242				
	1	Briefly describe the organization's mission or most significant activities PROVISION	ON O	F EDUCA	тτо	NAT,				
Activities & Governance	'	SUBSIDIES	<u> </u>	1 DDCC11	110	142121				
nar	2	Check this box If the organization discontinued its operations or disposed of	f more ti	nan 25% of its	net as	esets				
Ver	1	Number of voting members of the governing body (Part VI, line 1a)	-		3	14				
ဠ	3	Number of voting members of the governing body (Fait VI, line 1a)	=1//:-		4	14				
ಿ ರ	4	Number of independent voting members of the governing body (Part VI, line 15)? — C.F.		701	5	0				
ţį	5	Total number of employees (Part V, line 2a)			6	0				
ξi	6	Total number of volunteers (estimate if necessary) Total gross unrelated business revenue from Part VIII, column (C), line 123 MAR 2	2520			0.				
Ä	l l			SE	7a	0.				
	Ь	Net unrelated business taxable income from Form 990-T, Ine 34	VEN!	Prior_Year	7b					
	1_		01 - 0,		22	Current Year				
ne	8	Contributions and grants (Part VIII, line 1h)		281,3	44.	51,002.				
Revenue	9	Program service revenue (Part VIII, line 2g)	<u> </u>	40 0	0.0	44 272				
æ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	49,2		44,372.				
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-		41.					
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		329,8		95,374.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	62,6	87.	61,150.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)								
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,2		3,883.				
SUS	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<u> </u>	4,9	06.					
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25)	<u> </u>							
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	L	2,3		<u> 17,087.</u>				
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>		<u>79.</u>	<u>82,120.</u>				
		Revenue less expenses. Subtract line 18 from line 12		258,6	88.	13,254.				
Net Assets or Fund Balances			Begin	ning of Current	Year	End of Year				
sets	20	Total assets (Part X, line 16)	<u> </u>	1,158,1 :	<u> 15.</u>	1,366,556.				
d As	21	Total liabilities (Part X, line 26)								
		Net assets or fund balances. Subtract line 21 from line 20		<u>1,158,1</u>	<u> 15.</u>	<u>1,366,556.</u>				
Pa	art II	Signature Block								
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statem and complete Declaration of preparer (other than officer) is based on all information of which preparer has any know		to the best of my ki	nowledg	e and belief, it is true, correct,				
		and complete Declaration of prepare (office than officer) is based on an information of which prepare has any known	· lougo			_				
Sign	n	N XIOUM DINUS		15	M	Uch 2010				
Her		Signature of officer		Date						
		JOAN MORRIS, PRESIDENT								
		Type or print name and title								
		Preparer's Date	Check	ıf		's identifying number				
Paid		signature Notest 1. First 3-10-10	self- emplo	1	/see insi	tructions)				
	arer's	Firm's name (or SCHAILER & ASSOCIATES PC	1 3p.0	EIN >		 				
Use	Only	yours if self-employed), PO BOX 1808								
		JAMESTOWN, ND 58402-1808		Phone no	▶ ('	701)252~5422				
Mass	the II	RS discuss this return with the preparer shown above? (see instructions)		11 110110 110.		X Yes No				
iviay	uic II	to discuss this feturit with the brebater shown above; (see historious)				144 103 1110				

932001 02-04-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2009)

Forr	n 990 <u>.</u> (2009)	FACE (FOUNDA OF CHRISTIAN	TION FOR ADVANCEMENT EDUCATION	45-033	38271 Pag	ae i
Pa	rt III` Stater	ment of Program Service Ac	complishments			<u></u>
1 1	PROMOTI	e the organization's mission. ON AND DEVELOPMENT 'S ACADEMY	OF EDUCATIONAL OPPORT	UNITIES FOR STU	JDENTS OF	,ª
2	the prior Form	zation undertake any significant prog 990 or 990 EZ? tibe these new services on Schedule	ram services during the year which were no	t listed on	☐ Yes X	No
3	Did the organiz		nificant changes in how it conducts, any pro-	ogram services?	☐ Yes X	No
4	Describe the e Section 501(c)	xempt purpose achievements for eac (3) and 501(c)(4) organizations and so	ch of the organization's three largest prograi ection 4947(a)(1) trusts are required to report ue, if any, for each program service reported	rt the amount of grants and		
4a	(Code TUITION) (Expenses \$ 61 SUBSIDIES FOR PARC	L,150. including grants of \$ OCHIAL EDUCATION) (Revenue \$		
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$,
						_
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$		
						_
				··		

4d Other program services (Describe in Schedule O)

including grants of \$
\$ 61,150. (Expenses \$

) (Revenue \$

4e Total program service expenses ▶ \$

Form 990 (2009) OF CHRISTIAN
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	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	1	L 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		L
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		i	
	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		[ĺ
	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 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	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	X	<u> </u>
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			L
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
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		<u>X</u>
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		<u> </u>
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		_ <u>X</u> _
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	_	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		_X_
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		r (non .	วกกดา

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	1		1
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			İ
	column (A), line 2 ⁹ If "Yes," complete Schedule I, Parts I and III	22	<u> </u>	X
23	Did the organization answer "Yes" to Part VII, Section A, fine 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
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		ŀ	[
	Schedule K. If "No", go to line 25	24a		X
þ	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		ļ]
	any tax-exempt bonds?	24c		
	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	<u> </u>	X
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		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	<u> </u>	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)			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	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		<u>X</u>
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		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u> </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	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	İ		
	sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I	33		<u> X</u>
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		<u>X</u>
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		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1	i	
	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
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		<u>X</u> _
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	
		Form!	990 2	2009)

Form 990 (2009) OF CHRISTIAN EDUCATION [Part V] Statements Regarding Other IRS Filings and Tax Compliance

`					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Amual Summary and Transmittal of					
	U.S. Information Returns. Enter ·0· if not applicable	1a_		<u>0</u>		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b		<u>이</u>		}
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ble gaming			ļ
	(gambling) winnings to prize winners?	. 1		1c	 	<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	_2a		<u>0</u>		
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined for the control of the control			2b	├	
^	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see		=			3,5
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered to \$1,000 or m	ea by ti	nis return?	3a	 	X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	authan	ity over a	3b		<u> </u>
70	At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial)		-	4a		х
h	If "Yes," enter the name of the foreign country	accour	11.7 :	40		A
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign I	Bank a	nd .			1
	Financial Accounts	Dank a				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	1 1	Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?		5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega		Prohibited	- 55		_ _
·	Tax Shelter Transaction?			5c		l
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	ne orga	nization solicit			
	any contributions that were not tax deductible?	Ū		6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or	gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).			1		
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		X
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	as requ	ııred			
	to file Form 8282?			7c	1	_X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	 _	-		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersona	ıl	_		
	benefit contract?		•	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri			7f		
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		al?	7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring organization, have exceeding]]		
	at any time during the year?	755 DUS	siness notalings	8		
9	Sponsoring organizations maintaining donor advised funds.					
	Did the organization make any taxable distributions under section 4966?			9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
0	Section 501(c)(7) organizations. Enter.			-		
	Initiation fees and capital contributions included on Part VIII, line 12	10a	_] [
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b] [
1	Section 501(c)(12) organizations. Enter]]	J	
а	Gross income from members or shareholders	11a]		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	$\overline{}$			-	
	amounts due or received from them)	11b]	- [
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form,	1041?		12a		
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
				Form	990 (2	20091

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	ction A. Governing Body and Management			
		_	Yes	No
1a	Enter the number of voting members of the governing body 1a 14			
b	Enter the number of voting members that are independent 1b 14	<u>l</u>		1
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		X
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		X
6	Does the organization have members or stockholders?	6		<u>X</u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	_7a		<u>X</u>
þ	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b_	L	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following.			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		<u>X</u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			47
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9_		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
	Double of the body between a Wildred	40-	Yes	No_
	Does the organization have local chapters, branches, or affiliates?	10a		<u>X</u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	405		
	and branches to ensure their operations are consistent with those of the organization?	10b	X	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40-	1	v
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	-+	<u>X</u>
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		<u>_X</u>
14	Does the organization have a written document retention and destruction policy?	14		<u>X</u>
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>
b	Other officers or key employees of the organization	15b		<u>X</u> _
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)		- 1	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		<u>X</u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	ĺ	[
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
<u></u>	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE	.—	—. –	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	TOF		
	public inspection Indicate how you make these available. Check all that apply			
40	Own website Another's website W Upon request	.al £!~ −	1	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, ar	a tınar	ıcıai	
00	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 organizat	ion: 📂		
	MEGGEN HENKE - (701) 252-1178			
	P. O. BOX 1432, JAMESTOWN, ND 58402-1432	·	200 /2	1000

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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

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

- 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)	(B)		(C)						(D)	(E)	(F)
Name and Title	Average		Position		Reportable	Reportable	Estimated					
	hours	(cf				арр	ly)	compensation	compensation	amount of		
•	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations		
MIKE SMYTH		\vdash		\vdash		-						
SECRETARY		x						0.	0.	0.		
TIM KACHEL		-										
DIRECTOR		x					l	0.	0.	0.		
JOHN YATSKIS			_			İ —						
DIRECTOR	-	x						0.	0.	0.		
LARRY KROPP												
DIRECTOR		x						0.	0.	0.		
DAVID BARNICK												
DIRECTOR		X						0.	0.	0.		
WALT NIELAND												
DIRECTOR		X						0.	0.	0.		
JERRY BERGQUIST				ĺ								
DIRECTOR		X	_					0.	0.	0.		
JODEE RASMUSSEN								_	_	_		
DIRECTOR		X	_					0.	0.	0.		
TROY LEFEVRE				- 1				_	_	_		
DIRECTOR		X		}	_			0.	0.	0.		
DAN LISKO			l		- 1					•		
DIRECTOR		X			_			0.	0.	0.		
MEGHAN BRAUN				ļ	- }				0	0		
DIRECTOR		X	\dashv	-	\dashv	\dashv	_	0.		0.		
JOAN MORRIS	1		- 1	x				0.	0.	0.		
PRESIDENT MILLIE EBERTZ		-		쉬		-	_	0.				
TREASURER	-		ŀ	$ \mathbf{x} $				0.	0.	0.		
JAMES UKESTAD		-	\dashv	弁	-	-	\dashv			<u> </u>		
VICE PRESIDENT	}	}	- }	x	- }	- 1		0.	0.	0.		
VICE PRESIDENT									0.	<u> </u>		
		+	1		-	_						

` (A) Name and title	(B) Average			Pos				(D) Reportable	(E) Reportable		(F) Estimat	ted
	hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC) co	amount other ompens from the rganization and rela	r ation ne tion ted
·												
												-
		_							· · · · · · · · · · · · · · · · · · ·	_		··
		_										
1b Total 2 Total number of individuals (including but no	ot imited to the	ose I	ıste	d ab	ove	►) wh	o re	0 . ceived more than \$100		•		0.
compensation from the organization 3 Did the organization list any former officer,	director or trus	stee,	key	em	ploy	ee, o	or h	ghest compensated en	nployee on		Yes	No No
 Inne 1a? If "Yes," complete Schedule J for st For any individual listed on line 1a, is the suitand related organizations greater than \$150 	m of reportable								the organization	3		X
5 Did any person listed on line 1a receive or a the organization? If "Yes," complete Schedul	ccrue compen	satio	n fr						ces rendered to	5		Х
Section B. Independent Contractors 1 Complete this table for your five highest contractors the organization NONE	npensated ind	eper	nder	nt co	ntra	actor	rs th	nat received more than	\$100,000 of compe	nsation	from	
(A) Name and business a	address		_		_			(B) Description of se	ervices		(C) ensatio	n
	·						+					
2 Total number of independent contractors (in		t lim	ıted	to t	_		ted a	above) who received mi	ore than			
\$100,000 in compensation from the organization	AUON -	_			0					Form	990 2	2009)

FACE (FOUNDATION FOR ADVANCEMENT

Form 990 (2009) OF CHRISTIAN EDUCATION 45-0338271 Page 9 Part VIII Statement of Revenue (D)
Revenue
excluded from
tax under (A) (B) (C) Total revenue Related or Unrelated exempt function business sections 512. revenue revenue 513, or 514 gifts, grants 1 a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d Contributions, and other simil e Government grants (contributions) 1e f All other contributions, gifts, grants, and 51,002. similar amounts not included above 1f Noncash contributions included in lines 1a-1f \$ 51,002 h Total. Add lines 1a 1f Business Code Program Service Revenue f All other program service revenue g Total. Add lines 2a 2f Investment income (including dividends, interest, and 44,696. 44,696. other similar amounts) Income from investment of tax-exempt bond proceeds 4 Royalties (i) Real (II) Personal 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) ▶ (i) Securities (ii) Other 7 a Gross amount from sales of 117,741 assets other than inventory b Less: cost or other basis 118,065 and sales expenses <324.> c Gain or (loss) <324.> <324. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 **b** Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 а **b** Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b d All other revenue e Total, Add lines 11a-11d 95,374. 44,696. <324.>

Form 990 (2009)

Total revenue See instructions.

932009 02-04-10

Part IX Statement of Functional Expenses

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

	All other organizations must comp not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	56,578.	56,578.		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	4,572.	4,572.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the US				
•	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and		i		
_	persons described in section 4958(c)(3)(B)	2 (07		2 607	
7	Other salaries and wages	3,607.		3,607.	
8	Pension plan contributions (include section 401(k)		}	1	
	and section 403(b) employer contributions)				
9	Other employee benefits .	276.		276.	
10	Payroll taxes	4/0.		2/0.	
11	Fees for services (non-employees)				
a	Management				
b	LegalAccounting	1,800.		1,800.	
c d	Lobbying	1,000.		1,000.	
u	Professional fundraising services See Part IV, line 17				· · ·
f	Investment management fees	1,706.		1,706.	 -
g	Other	10,540.		10,540.	
12	Advertising and promotion	10,310.		20/0101	
13	Office expenses	1,806.		1,806.	
14	Information technology	= 70003			
15	Royalties		-		
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	340.		340.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	73.		73.	
23	Insurance	374.		374.	
24	Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а					
b				-	
С					<u> </u>
d					
e		440		440	
	All other expenses	448.	<u> </u>	<u>448.</u> 20,970.	0
25	Total functional expenses Add lines 1 through 24f	82,120.	61,150.	20,970.	
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				Form 990 (2009

Form 990 (2009)
Part X Balance Sheet

•			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	3,550.	2	859
	3	Pledges and grants receivable, net		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	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
]	Part II of Schedule L		6	
şţ	7	Notes and loans receivable, net		7	
Assets	8	Inventones for sale or use		8	
Q.	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment. cost or other .			
		basis Complete Part VI of Schedule D 10a 1,231.	0		1 1 5 0
	-	Less accumulated depreciation 10b 73.	0.	10c	1,158. 1,364,539.
	11	Investments - publicly traded securities	1,154,565.	_11	1,304,539
	12	Investments other securities See Part IV, line 11		12	
	13	Investments - program related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,158,115.	15 16	1,366,556.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,130,113.	17	1,300,330.
	17	Accounts payable and accrued expenses		18	
	18	Grants payable Deferred revenue		19	
	19	Tax-exempt bond liabilities		20	· · · · · · · · · · · · · · · · · · ·
	20	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Ę	21	Payables to current and former officers, directors, trustees, key employees,		<u></u> -	
Liabilities	22	highest compensated employees, and disqualified persons. Complete Part II			
٣		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0.	26	0.
		Organizations that follow SFAS 117, check here ▶ X and complete			
s.		lines 27 through 29, and lines 33 and 34.		ľ	
ĕ	27	Unrestricted net assets	1,063,812.	27	1,222,765.
<u>a</u>	28	Temporanly restricted net assets		28	0.
<u> </u>	29	Permanently restricted net assets	94,303.	29	143,791.
5		Organizations that do not follow SFAS 117, check here			
ō		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid·in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	1,158,115.	33	1,366,556.
	34	Total liabilities and net assets/fund balances	1,158,115.	34	1,366,556.

FACE (FOUNDATION FOR ADVANCEMENT 45-0338271 Page 12 Form 990,(2009) OF CHRISTIAN EDUCATION Part XI Financial Statements and Reporting Yes No Accounting method used to prepare the Form 990 X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O X 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Х 2b b Were the organization's financial statements audited by an independent accountant? 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 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. Both consolidated and separate basis X Separate basis Consolidated 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 За X 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

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

2009

Open to Public Inspection

Name of the organization Employer identification number FACE (FOUNDATION FOR ADVANCEMENT CHRISTIAN EDUCATION 45-0338271 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in ection 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 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). 6 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) 9 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type III - Other c ____ Type III - Functionally integrated a Type I 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 f supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(III) Provide the following information about the supported organization(s). h (vi) Is the organization in col. (iii) Type of (iv) is the organization (v) Did you notify the (i) Name of supported (vii) Amount of (ii) EIN organization organization in col. in col. (i) listed in your organization organized in the support (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes No Yes No Yes No

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

Schedule A (Form 990 or 990-EZ) 2009

FACE (FOUNDATION FOR ADVANCEMENT Schedule A (Form 990 or 990 EZ) 2009 OF CHRISTIAN EDUCATION 45-0338271 Page 2 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 beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not 16,038. 25,803. include any "unusual grants") 135,695. 41,855. 51,002 270,393. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 16,038. 41,855. 51,002. 270,393. 135,695. 25,803. 4 Total, Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, 86,303. column (f) 184,090. 6 Public support. Subtract line 5 from line 4 Section B. Total Support (b) 2006 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) (a) 2005 (c) 2007 (d) 2008 270,393. 51,002. 25,803, 41,855. 135,695. 16,038. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 82,150. 49,286. 44,696. 289,437. 47,622. 65,683. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 559,830. 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 13 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 32.88 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 % 15 35.64 15 Public support percentage from 2008 Schedule A, Part II, line 14 % 16a 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 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 $\triangleright |X|$ 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

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

18 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

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and						1
membership fees received. (Do not			1	į		
include any "unusual grants.")			1	ł		ł
2 Gross receipts from admissions,					_	
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the						1
organization's tax exempt purpose						
3 Gross receipts from activities that						ŀ
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-					1	}
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5				· · ·		
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
· · · · · · · · · · · · · · · · · · ·					-	
b Amounts included on lines 2 and 3 received from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year				·		
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support					_ _	
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest,	_]	
dividends, payments received on	1	İ				
securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975					İ	
·						
c Add lines 10a and 10b					 	
11 Net income from unrelated business activities not included in line 10b,						
whether or not the business is						
regularly carried on					_	
12 Other income Do not include gain or loss from the sale of capital						
assets (Explain in Part IV)				 _		
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the	ne organization's	first, second, third	i, fourth, or fifth ta	x year as a secti	on 501(c)(3) organiza	ation,
check this box and stop here	•			•		▶□
Section C. Computation of Public	Support Per	centage				
15 Public support percentage for 2009 (lin			olumn (f))		15	
16 Public support percentage from 2008 S		-	J. J. J. J. J. J. J. J. J. J. J. J. J. J		16	
Section D. Computation of Invest					110 1	
			2 12 column (6)		147	
17 Investment income percentage for 2009			e 13, column (t))		17	
18 Investment income percentage from 20					18	
19a 33 1/3% support tests - 2009. If the or	ganization did no	t check the box o	n line 14, and line	15 is more than	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box and	stop here. The o	rganızatıon qualıfi	es as a publicly su	pported organiz	ation	▶∟
		t ahaak a bay aa	lan 14 or lan 10a	and line 16 is m	om than 33 1/3% a	nd
b 33 1/3% support tests - 2008. If the or	ganization did no	t check a box on	ille 14 of lifte 19a,	and line to is in	Ole Illail 33 1/370, a	110
b 33 1/3% support tests - 2008. If the or line 18 is not more than 33 1/3%, check	-					▶□

Schedule DS

(Form 990)

Department of the Treasury Internal Revenue Service

upplemental 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.

2009
Open to Public Inspection

Name of the organization

FACE (FOUNDATION FOR ADVANCEMENT OF CHRISTIAN EDUCATION

Employer identification number 45-0338271

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 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 advis	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		used only
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land-for public use (e.g., recreation or p	oleasure) Preservation of an his	storically important land area
	Protection of natural habitat	Preservation of a cert	rified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	of a conservation 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
С	Number of conservation easements on a certified historic stri	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per	odic monitoring, inspection, handling of	— —
	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	the organization's accounting for
Dai	conservation easements III Organizations Maintaining Collections of	Art Historical Treasures, or O	ther Similar Assets.
rai	Complete if the organization answered "Yes" to Form		
	Complete in the organization are to the term		
12	If the organization elected, as permitted under SFAS 116, not	to report in its revenue statement and ba	alance sheet works of art, historical
ıa	treasures, or other similar assets held for public exhibition, ed		
	the footnote to its financial statements that describes these if		
ь.	If the organization elected, as permitted under SFAS 116, to		ce sheet works of art, historical treasures,
J	or other similar assets held for public exhibition, education, or		
	these items		, ,
	(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 trea	sures, or other similar assets for financial	_
~	the following amounts required to be reported under SFAS 11		
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
	Assets included in Form 990. Part X	•	► \$ ► \$

FACE (FOUNDATION FOR ADVANCEMENT Schedule D (Form 990) 2009 OF CHRISTIAN EDUCATION Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3. Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply). Public exhibition Loan or exchange programs а Scholarly research Other b Preservation for future generations C Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ∫No Part IV | Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included Yes No on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: Amount 1c c Beginning balance 1d Additions during the year 1e Distributions during the year 1f Ending balance Yes No 2a Did the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 Part V (c) Two years back (d) Three years back (e) Four years back (a) Current year (b) Prior year 94,303 1a Beginning of year balance 32,226. **b** Contributions 21,834 c Net investment earnings, gains, and losses 4,572. Grants or scholarships Other expenditures for facilities and programs f Administrative expenses 143,791. End of year balance Provide the estimated percentage of the year end balance held as: Board designated or quasi-endowment Permanent endowment ► 100.00 Term endowment 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization Yes No by 3a(i) (i) unrelated organizations 3a(ii) (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10

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

(a) Cost or other

basis (investment)

1,231

(b) Cost or other basis (other)

Description of investment

Schedule D (Form 990) 2009

(d) Book value

1,158

1.158.

(c) Accumulated

depreciation

73

1a Landb Buildings

d Equipmente Other

c Leasehold improvements

FACE (FOUNDATION FOR ADVANCEMENT

Schedule.D (Form 990) 2009 OF CHRISTI Part VII Investments - Other Securities.	AN EDUCATION		45	-0338271	Page 3		
	See Form 990, Part X, lin	e 12					
 (a) Description of security or category (including name of security) 	(b) Book value				(c) Method of valuation: Cost or end-of-year market value		
	 - · · · -	<u> </u>		ket value			
Financial derivatives							
Closely-held equity interests							
Other							
							
							
							
Total (Col (h) must squal Form 000, Part V, sol (P) line 12.)	 	- 	-				
Total (Col (b) must equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related. S	Pag Farm 000 Part V In	. 12					
i art viii ilivestillents - Program helated.	See Form 990, Part X, IIII	e 13	(c) Method of valua	tion			
(a) Description of investment type	(b) Book value	ر ا	ost or end-of-year mark				
	 						
	 				<u> </u>		
	 						
			_				
Total (Col (b) must equal Form 990, Part X, col (B) line 13.)	-						
Part IX Other Assets. See Form 990, Part X, line	2 15						
	Description	· · · · · · · · · · · · · · · · · · ·	T T	(b) Book valu	ne e		
	<u> </u>						
		_					
	·						
							
			-				
							
			-				
		· · · · · · · · · · · · · · · · · · ·	_				
Fotal. (Column (b) must equal Form 990, Part X, col (B) line	e 15)						
Part X Other Liabilities. See Form 990, Part X,	line 25						
(a) Description of liability		(b) Amount	_				
ederal income taxes							
			7				
			1 .				
			┤ `				
			7				
			-				
	· -		1				
			-				
			-				
otal. (Column (b) must equal Form 990, Part X, col (B) line	925). ▶		1				

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

FACE (FOUNDATION FOR ADVANCEMENT 45-0338271 Page 4 Schedule D (Form 990) 2009 OF CHRISTIAN EDUCATION Part XI' Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements 95,374. 1º Total revenue (Form 990, Part VIII, column (A), line 12) Total expenses (Form 990, Part IX, column (A), line 25) 82,120. 2 2 13,254. Excess or (deficit) for the year. Subtract line 2 from line 1 3 3 195,187. Net unrealized gains (losses) on investments 4 Donated services and use of facilities 5 5 6 Investment expenses 6 7 7 Prior period adjustments Other (Describe in Part XIV) 8 8 195,187 Total adjustments (net) Add lines 4 through 8 9 Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9 10 208,441 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements 288,855. Amounts included on line 1 but not on Form 990, Part VIII, line 12: 195,187 a Net unrealized gains on investments 2a 2b b Donated services and use of facilities 2c c Recoveries of prior year grants d Other (Describe in Part XIV) 2d 195,187. 2e e Add lines 2a through 2d 93,668. Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1 1,706. a Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b b Other (Describe in Part XIV) 1,706. 4c c Add lines 4a and 4b 95,374. Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 80,414. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25 2a a Donated services and use of facilities 2b **b** Prior year adjustments **2**c c Other losses 2d d Other (Describe in Part XIV) 2e e Add lines 2a through 2d 80.414. 3 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1. 1,706. a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIV) 4b 1,706. c Add lines 4a and 4b 4c 82.120. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIV Supplemental Information Complete 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 and 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 this part to provide any additional information

SCHEDULE I (Form 990)		Grants and Governments	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	to Organizations in the United Stat	. se		OMB No. 1545-0037
Department of the Treasury Internal Revenue Service	Comp	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.	n answered "Yes" on Fo ▶ Attach to Form 990.	on Form 990, Par n 990.	t IV, line 21 or 22.		Open to Public Inspection
Name of the organization FACE (FI	E (FOUNDATION FOR A CHRISTIAN EDUCATION	FOR ADVANCEMENT	ENT			Ū	Employer identification number
Part I General Information on Grants and Assistance	its and Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	rds to substantiate th	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	istance, and the selectic	Ę
criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	assistance? s procedures for mon	toring the use of grant	funds in the United	States			X Yes
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990. Part IV. line 21 for any	to Governments an	d Organizations in the	e United States. C	omplete if the orga	nization answered "Y	es" to Form 990. Part IV	line 21 for any
recipient that received more th	nan \$5,000 Check thi	s box if no one recipier	nt received more th	an \$5,000. Use Pa	rt IV and Schedule I-1	(Form 990) if additional	space is needed
1 (a) Name and address of organization (b) EIN (c) IRC section or government or government (b) EIN (c) IRC section (d) Amount of cash grant or government (e) Amount of cash grant (f) Method of valuation (f) Method of valuation of (h) Purpose or assistance or assistance other)	(q)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST JOHN'S ACADEMY							
215 STH ST SE							
JAMESTOWN ND 58401		501 (C) 3	56,578,	0			
2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations	(3) and government o	rganizations					A
٦,	IIIOIIIS]
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	eduction Act Notice	, see the Instructions	for Form 990.				Schedule I (Form 990) 2009

FACE (FOUNDATION FOR ADVANCEMENT

OF CHRISTIAN EDUCATION Schedule I (Form 990) 2009

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Use Part IV and Schedule I-1 (Form 990) if additional space is needed

Page 2

45-0338271

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance

Schedule I (Form 990) 2009

932102 02-02-10

SCHEQULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

QMB No 1545-0047
2009
Open to Public Inspection

Name of the organization

FACE (FOUNDATION FOR ADVANCEMENT OF CHRISTIAN EDUCATION

Employer identification number 45-0338271

FORM 990, PART VI, SECTION A, LINE 8B: NO MINUTES ARE KEPT BUT REPORTS ARE
PRESENTED TO THE FULL BOARD WHO MUST APPROVE THE ACTIONS OF THE COMMITTEE
FORM 990, PART VI, SECTION B, LINE 11: COPIES WERE REVIEWED WITH THE
FINANCE COMMITTEE IN DETAIL AND ADDITIONAL COPIES WERE AVAILABLE AT THE
ANNUAL MEETING FOR THE REST OF THE BOARD PRIOR TO FILING WITH THE IRS
FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST, COPIES ARE AVAILABLE
AT THE OFFICE OF THE ORGANIZATION
THE FINANCE COMMITTEE WILL HAVE OVERSIGHT OVER THE ISSUANCE OF THE
AUDIT REPORT