



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Short Form  
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form  
► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-1150

2009

Open to Public  
Inspection

A For the 2009 calendar year, or tax year beginning January 1, 2009, and ending December 31, 2009

B Check if applicable.	C Name of organization <b>City Mission of Findlay Ohio</b>	D Employer identification number <b>51-0137853</b>
<input type="checkbox"/> Address change	Number and street (or P.O. box, if mail is not delivered to street address) <b>510 West Main Cross Street</b>	E Telephone number <b>419-423-9151</b>
<input type="checkbox"/> Name change	City or town, state or country, and ZIP + 4 <b>Findlay, OH 45840-3339</b>	F Group Exemption Number ►
<input type="checkbox"/> Initial return		
<input type="checkbox"/> Terminated		
<input type="checkbox"/> Amended return		
<input type="checkbox"/> Application pending		

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting Method:  Cash  Accrual  
Other (specify) ►H Check ►  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).I Website: ► [www.findlaymission.org](http://www.findlaymission.org)J Tax-exempt status (check only one) —  501(c) ( 3 ) (insert no.)  4947(a)(1) or  527K Check ►  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ **358,913**

## Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

1 Contributions, gifts, grants, and similar amounts received . . . . .	1	356,571
2 Program service revenue including government fees and contracts . . . . .	2	0
3 Membership dues and assessments . . . . .	3	0
4 Investment income . . . . .	4	467
5a Gross amount from sale of assets other than inventory . . . . .	5a	0
b Less: cost or other basis and sales expenses . . . . .	5b	0
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	5c	0
6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ► <input type="checkbox"/>		
a Gross revenue (not including \$ 0 of contributions reported on line 1) . . . . .	6a	0
b Less: direct expenses other than fundraising expenses . . . . .	6b	0
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . . .	6c	0
7a Gross sales of inventory, less returns and allowances . . . . .	7a	0
b Less: cost of goods sold . . . . .	7b	0
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	7c	0
8 Other revenue (describe ► <b>Gross Rents</b> ) . . . . .	RECEIVED	1,875
9 <b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		<b>358,913</b>
10 Grants and similar amounts paid (attach schedule) . . . . .	10	0
11 Benefits paid to or for members . . . . .	11	0
12 Salaries, other compensation, and employee benefits . . . . .	12	237,785
13 Professional fees and other payments to independent contractors . . . . .	13	0
14 Occupancy, rent, utilities, and maintenance . . . . .	14	41,255
15 Printing, publications, postage, and shipping . . . . .	15	15,916
16 Other expenses (describe ► <b>Other operating and 50,805 non-cash also included in Line 1</b> ) . . . . .	16	79,692
17 <b>Total expenses.</b> Add lines 10 through 16 . . . . .	17	374,648
Net Assets		
18 Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	18	-15,735
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .	19	635,727
20 Other changes in net assets or fund balances (attach explanation) . . . . .	20	-82,891
21 Net assets or fund balances at end of year. Combine lines 18 through 20 . . . . .	21	537,101

## Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments . . . . .	223,049	22 154,658
23 Land and buildings . . . . .	383,285	23 349,528
24 Other assets (describe ► <b>Funds held by Community Foundation and ppd expenses</b> ) . . . . .	29,393	24 44,455
25 <b>Total assets</b> . . . . .	635,727	25 548,6471
26 <b>Total liabilities</b> (describe ► <b>Payroll liabilities and credit card balances</b> ) . . . . .	0	26 11,540
27 <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21) . . . . .	635,727	27 537,101

14G9

**Part III Statement of Program Service Accomplishments (See the instructions for Part III.)**

**What is the organization's primary exempt purpose? **Provide shelter and food for those in need****

What is the organization's primary exempt purpose? \_\_\_\_\_ Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

## Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

28 During calendar year 2009 the City Mission provided 712 individuals with 5,502 nights of housing. In addition, a total of 23,180 meals were served to 16,506 residents and 6,674 "drop in guests" that came to the City Mission for meals.

(Grants \$  ) If this amount includes foreign grants, check here

28

300,137

29

**(Grants \$**  **) If this amount includes foreign grants, check here**

29

30

(Grants \$  ) If this amount includes foreign grants, check here

30

**31 Other program services (attach schedule)**

(Grants \$ ) If this amount includes foreign grants, check here

31

32

**Total program service expenses (add lines 28a through 31a)**

32

**Part IV List of Officers, Directors, Trustees, and Key Employees.** List each one even if not compensated. (See the instructions for Part IV.)

## Part V Other Information (Note the statement requirements in the instructions for Part V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .	33	✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes . . . . .	34	✓
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? . . . . .	35a	✓
b If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	35b	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .	36	✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a 0	37a	0
b Did the organization file Form 1120-POL for this year? . . . . .	37b	
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? . . . . .	38a	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	38b	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 . . . . .	39a	
b Gross receipts, included on line 9, for public use of club facilities . . . . .	39b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:		
section 4911 ► 0 ; section 4912 ► 0 ; section 4955 ► 0		0
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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 . . . . .	40b	✓
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ► 0		0
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ► 0		0
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. . . . .	40e	✓
41 List the states with which a copy of this return is filed. ► Ohio		
42a The organization's books are in care of ► Phil Arnold Telephone no. ► 419-420-5369 Located at ► 510 West Main Cross Street, Findlay, OH ZIP + 4 ► 45840-3339		
b 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)? . . . . .	42b	✓
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.		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . . If "Yes," enter the name of the foreign country: ►	42c	✓
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ► 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	44	✓
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	45	✓

**Part VI**

**Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b and complete the tables for lines 50 and 51.

**46** 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 . . . . . **46**

**47** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . . **47**

**48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . . **48**

**49a** Did the organization make any transfers to an exempt non-charitable related organization? . . . . . **49a**

**b** If "Yes," was the related organization a section 527 organization? . . . . . **49b**

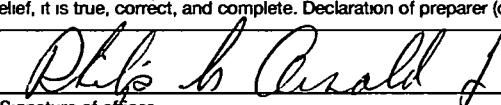
**50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
<b>f</b> Total number of other employees paid over \$100,000 . . . . . ► <b>None</b>				

**51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

**d** Total number of other independent contractors each receiving over \$100,000 . . . . . ► **None**

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
	► 	Date	8-11-10
	► Philip G. Arnold Jr., Treasurer	Type or print name and title	

<b>Paid Preparer's Use Only</b>	Preparer's signature ►	Date	Check if self-employed ► <input type="checkbox"/>	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ►		EIN ►	
			Phone no. ►	

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ►  Yes  No

**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.

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**City Mission of Findlay Ohio**

Employer identification number

**51 0137853**

**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.)

- 1  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: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7  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.)
- 10  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11  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.
 

a  Type I      b  Type II      c  Type III—Functionally integrated      d  Type III—Other

e  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).

f  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 \_\_\_\_\_

g 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) and (iii) below, the governing body of the supported organization? \_\_\_\_\_

(ii) A family member of a person described in (i) above? \_\_\_\_\_

(iii) A 35% controlled entity of a person described in (i) or (ii) above? \_\_\_\_\_

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?	(vii) Amount of support
			Yes	No	Yes	No		
<b>Total</b>								

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**  
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)
**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	272,716	311,917	345,039	387,073	356,571	1,673,396
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .	0	0	0	0	0	0
4 <b>Total.</b> Add lines 1 through 3 . . . . .	272,716	311,917	345,039	387,073	356,571	1,673,396
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . .						0
6 <b>Public support.</b> Subtract line 5 from line 4. . . . .						1,673,396

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4 . . . . .	272,716	311,917	345,039	387,073	356,571	1,673,396
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	1,093	7,734	10,603	8,419	2,342	30,191
9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .	0	0	0	0	0	0
11 <b>Total support.</b> Add lines 7 through 10 . . . . .						1,703,587
12 Gross receipts from related activities, etc. (see instructions) . . . . .					12	
13 <b>First five years.</b> 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 <b>stop here</b> ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	98.2 %
15 Public support percentage from 2008 Schedule A, Part II, line 14 . . . . .	15	98.2 %
16a <b>33½ % support test—2009.</b> If the organization did not check the box on line 13, and line 14 is 33½ % or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . . ► <input checked="" type="checkbox"/>		
b <b>33½ % support test—2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33½ % or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
17a <b>10%-facts-and-circumstances test—2009.</b> 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 <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
b <b>10%-facts-and-circumstances test—2008.</b> 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 <b>stop here</b> . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ► <input type="checkbox"/>		
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

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

**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 include any "unusual grants.") . . . . .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . . .						
3 Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . . .						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
<b>b</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 . . . . .						
<b>c</b> Add lines 7a and 7b . . . . .						
<b>8 Public support</b> (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
<b>9</b> Amounts from line 6 . . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .						
<b>14 First five years.</b> 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 ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	%
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15 . . . . .	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	%
<b>18</b> Investment income percentage from 2008 Schedule A, Part III, line 17 . . . . .	<b>18</b>	%
<b>19a 33 1/3 % support tests—2009.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
<b>b 33 1/3 % support tests—2008.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

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

## Part V, Line 34 – Changes to governing document

**CODE OF REGULATIONS  
OF THE CITY MISSION OF FINDLAY, OHIO****Article I NAME**

The name of this non-profit corporation shall be THE CITY MISSION OF FINDLAY, OHIO. Its address is Findlay, Hancock County, Ohio.

**Article II OBJECTIVES**

The objectives of the City Mission are:

- to serve local and transient homeless persons by providing emergency shelter, food, and clothing,
- to provide non-denominational Christian religious services,
- to give spiritual counsel, guidance, and comfort to those in need,
- to cooperate with governmental agencies and other religious and social organizations in helping the poor and needy,
- to operate and conduct its activities exclusively for religious charitable purposes in such a manner that it qualifies as an exempt organization under Section 501C(3) of the Internal Revenue Code, and
- to receive contributions and make expenditures in fulfillment of the above objectives.

Revision of ARTICLE II adopted 12/14/99

**Article III GOVERNING BODY**

A Board of Trustees consisting of twelve (12) members shall govern the City Mission. The Board shall consist of ten (10) elected trustees and also the General Director and the Associate Director. The General Director and the Associate Director shall always serve as trustees. A term of service consists of four consecutive years beginning on January 1st and concluding on December 31st four years later.

In the 2007 transition from eight (8) elected members to ten (10), it was necessary to make one of the new positions a two (2) year term with the option of renewing that position for an additional four (4) year term at the beginning of 2010. At that point in time, succession will have three (3) members' terms on the Board beginning on even years, and two (2) members' terms on the Board beginning on odd years.

Board members who have served a full term may serve a consecutive full term if requested by the Nominating Committee and approved by a majority vote of the Board. Vacancies may be filled at anytime with a majority vote of the Board of Trustees. Any person elected to fill an unexpired term may elect to serve a consecutive full four (4) year term commencing at the end of the first term with a majority Board approval. Any Trustee, who fails to attend three consecutive meetings of the Board without being excused, shall automatically be dismissed from the Board.

Revision of ARTICLE III, paragraph 2 adopted 11/19/07  
Revision of ARTICLE III, paragraph 3 adopted 09/21/09

**Article IV NOMINATING PROCEDURE**

Those Churches who are supporting City Mission shall be contacted prior to trustee elections inviting them to submit candidates for the Board of Trustees. Members of the Board as well as the President and the Directors may also nominate candidates. The Board is encouraged to seek candidates who possess leadership and/or fiscal skills. The election to the Board of Trustees will be held during the November meeting and their term shall begin on January 1st of the year following the election.

*(Note: See policy on Nominating Committee)*

**Article V OFFICERS OF THE BOARD OF TRUSTEES**

Each officer of the Board of Trustees shall serve until his/her successor has been elected. Officers shall be elected at the regular November meeting.

**President**

The President shall preside at all the meetings of the Board of Trustees, appoint subcommittees as are necessary and perform other duties that may be approved by the Board of Trustees, serve as a member of all committees, and may appoint designees as needed.

**Secretary**

The Secretary shall keep records of all the meetings of the Board of Trustees, provide minutes of the prior meeting, provide copies of the Board minutes of the prior meeting to the members of the Board prior to the next scheduled Board meeting, submit a brief news article which has been approved by the President and/or Director to the local newspaper the day after the Board meeting, and perform such other duties as the President or the Board may direct.

**Treasurer**

The Treasurer shall manage all funds belonging to City Mission, keep accurate accounting of these funds, make a financial report at each meeting of the Board of Trustees, arrange for an annual audit, review, or compilation to be performed outside the membership of the Board, **select an independent CPA at the Board's recommendation**, make appropriate monetary drafts to satisfy the debits and expenses involved in the operation of City Mission, **provide a copy of the Form 990, including required schedules, as ultimately filed with the IRS, to each member of the Board before it is filed**, and perform such other duties as the President or the Board may direct.

Treasurer's duties amended (**bold**) 07/20/09 to meet IRS requirements

**Director(s) of the Mission**

The Mission Director(s) shall operate City Mission under the guidance of the Board of Trustees. The Director(s) shall submit monthly written reports containing the actions of City Mission at each monthly meeting or upon request of the President.

**Article VI MEETINGS OF THE BOARD OF TRUSTEES**

Meetings of the Board of Trustees shall be held at a date and time determined at the previous meeting. The President or designee shall preside at all meetings of the Board of Trustees. The President may call special meetings of the Board. A majority of all Trustees shall constitute a quorum.

A meeting of Executive Session defined as only elected Board members may be called at any regular meeting, or in a special meeting.

**Article VII FUNDS**

Form 990EZ

The City Mission of Findlay Ohio

EIN 51-0137853

Funds and other assets of City Mission shall be held, invested, reinvested, expended, and distributed by the Board of Trustees only for purposes authorized by the Articles of Incorporation, the Code of Regulations, and the laws of the State of Ohio, provided that no expenditures shall be made and no activities authorized by the Board that could/would cause City Mission to lose its classification as a 501(c)(3) organization exempt from Federal Income Taxes. **Under these circumstances, no Board member or employee of City Mission shall engage in any lobbying or other political activity which could jeopardize the Mission's tax exempt status. Neither shall the Mission accept any endorsement from or make any endorsement of a political group or individual.**

Amended (**bold**) 07/20/09 to meet IRS requirements

#### **Article VIII AMENDMENTS**

This Code of Regulations may be added to, repealed, or amended by a majority vote, a quorum present, at a regularly called meeting of the Board of Trustees provided notice of the proposed amendment has been sent to all Trustees along with a notice of the meeting at least one week prior to the meeting of the Board.

Revised 01/14/00

**Page 1, Line 20, Other changes in net assets - \$82,891 decrease in value**

This amount is comprised of:

Depreciation	-61,780
Change in Community Foundation Value	12,736
Adjustments to 1/1/2009 Fixed Assets	-29,882
Adjustments to 1/1/2009 Current Assets & Liabilities	<u>-3,965</u>
Part 1, Line 20	-82,891

The calculation of depreciation is shown in a separate attachment.

The Community Foundation explanation is shown below.

Prior to 1/1/2009, all Fixed Assets were treated as a single category with a single asset life. The review of Fixed Assets and grouping into asset classifications resulted in a reduction in the net value of these assets of \$29,882.

On 1/1/2009 the City Mission financial records were moved to an accounting software (Quickbooks) from a checking software (Quicken) which allows for more comprehensive tracking of assets and accounts. This resulted in the inclusion of Current Assets and Liabilities for year end 2009 which resulted in a net decrease in net assets of \$3,965.

**Page 1, Line 24, Other Assets - \$42,129**

The amount listed, \$42,129, represents funds invested in the Community Foundation of Findlay-Hancock County (Community Foundation). The Community Foundation is a non-profit organization that supports various charities in the Findlay-Hancock area. The amounts held with the Community Foundation are invested generating investment income and can appreciate/depreciate through changes in the value of the investments. The general public can make contributions to the City Mission funds through the Community Foundation. Use of the funds is subject to restrictions as determined by the Community Foundation. This balance represents a \$12,736 increase in value over the balances as of December 31, 2008.

Year	Category	Description	Life	Asset Categories					Total	Accum Depr
				Land	Building	Equip-fixed	Appliance	Computer		
1997	land	original bldg	30	10,000	20,000				30,000	8,333
1997	land	Front Street property	30	10,000	43,000				53,000	43,000
1998	building	bldg construction	30		420,909				420,909	161,348
1998	equip-fixed	misc bldg equipment	15			50,000			50,000	38,333
2000	equip-fixed	8 kw gas generator	15		10,852				10,852	6,873
2001	appliance	security cameras	5			6,620			6,620	6,620
2001	appliance	security cameras	5			600			600	600
2001	appliance	call station	5			600			674	674
2002	computer	computer & printer	3			1,898			1,898	1,898
2002	computer	copier	3			744			744	744
2002	furnish	carpet	5			880			880	880
2003	appliance	dishwasher	5			5,273			5,273	5,273
2003	computer	office pc	3				1,107		1,107	1,107
2004	equip-fixed	replace tile floor	15			949	1,322		949	348
2004	appliance	refrigerator	5			2,041			1,322	1,322
2005	appliance	alarm system	5				2,041		2,041	1,837
2005	appliance	new copier	3			968			968	807
2007	computer	replace furnace from floo	15			4,500			4,500	750
2007	appliance	security cameras	5			2,233			2,233	1,117
2008	computer	new copier	3			2,646			2,646	1,323
2008	vehicle	van	5			5,000			5,000	5,000
2008	equip-fixed	basement door replace	15			612			612	61
2008	equip-fixed	basement electrical	15			2,555			2,555	256
2008	equip-fixed	replace water heaters	15			1,500			1,500	150
2008	furnish	upstairs carpet	5				2,720		2,720	816
2008	equip-fixed	upstairs floor & drain	15			3,680			3,680	368
2008	equip-fixed	repair sewer and gas line	15			3,154			3,154	315
2009	building	508 west main cross	0	9,300	36,880				46,180	36,880
2009	building	grade and pave lots	30		3,800				3,800	63
2009	appliance	security cameras	5			889			889	89
2009	furnish	new chairs	5				666		666	67
2009	computer	computers	3			6,369			6,369	1,062
			29,300	534,590	67,801	19,652	13,732	4,266	5,000	674,342
										324,814

Category Summary	12/31/2009		1/1/2009		2009	
	Total Fixed Assets	Accumulated Depreciation	Accumulated Depreciation	Depreciation	Depreciation	Accumulated Depreciation
Account						
13200	depr - buildings	553,889	249,625	197,985	51,640	
13400	depr - fixed equip	77,802	47,454	42,268	5,187	
13500	depr - appliances	19,652	17,531	16,455	1,076	
13600	depr - furnish	4,266	1,763	1,152	611	
13700	depr - computer	13,732	6,940	4,674	2,266	
13800	depr - vehicles	5,000	1,500	500	1,000	
	674,342	324,814	263,034	263,034		61,780