

# 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



**Return of Organization Exempt From Income Tax** 

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

OMB No 1545-0047 2009

ment of the Treasury

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

Open to Public Inspection

or the	2009 calend	dar year, o	or tax year beginnir	ng	, 2	009, and	d endir	ıg		,		-	
heck if a	pplicable		C Name of organization	on .				<u> </u>	D Employ	er Identifi	cation Nun	nber	
Addre	ess change	Please use IRS label	ACTION MINI	STRIES, I	NC				61-3	13302	12		
Name	e change	or print or type	Number and street (			eet addr)	Room/s	uite	E Telepho				
Initial	return	See specific	4375 BORON	DRIVE			ľ		(859	9) 26	1-364	9	
Term	ınatıon	Instruc- tions	City town or country	у		State ZIP	code +	1		,			
Amer	nded return		COVINGTON			KY 4:	1015		G Gross re	eceipts \$	329,	105.	
Appli	cation pending	F Name a	and address of principal o	fficer		·		H(a) is this	a group retur				Х но
		TOM DO	ORMAN 4375 BO	DRON DR C	OVINGTON	KY 4	1015		affiliates incl		[	Yes	No
Tax-e:	xempt statu			nsert no )	4947(a)(1) c		527	If 'No,'	attach a list	(see instr	uctions) —	_	
Webs	ite: ► N/			<del> </del>				H(c) Group	exemption nu	mber ►			
Form of	organization	X Corpora	ation Trust	Association Of	her ►	L Year	of Forma	tion 199			jal domicile	KY	
iI	Summa	ary				<del></del>			· ·		<del></del>		
1 B	riefly descri	be the org	ganization's mission	or most signifi	cant activities	TO P	ROVI	DE FOO	D TO LO	NI WC	COME	FAMI	LIES
			NTY KENTUCKY										
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_							. <b></b>						
	heck this bo		if the organization of			lisposed	of mor	e than 25	% of its as		_		
			bers of the governing			113				3 1			
			t voting members of		body (Part VI, I	ine ib)				4 1	3		
			yees (Part V, line 2. eers (estimate if ne	,							00		
			ousiness revenue fro		olumn (C), ine 1	2				7a			0.
	•		taxable income fro	•	• • •	_				7b		-	
									rior Year		Curr	ent Yea	
8 C	ontributions	and gran	ts (Part VIII, line 1h	)					,432,6	01.		328,	
<b>0</b> D		_	ue (Part VIII, line 2	•					,, -				
<b>=</b>	-		art VIII, column (A),		7d)				-27,3	25.			641.
<b>₹</b> 0	ther revenu	e (Part VI	II, column (A), lines	5, 6d, 8c, 9c,	10c, and 11e)								
<b>&gt;</b> 22 T∢	otal revenue	e – add lir	nes 8 through 11 (m	iust equal Part	VIII, column (A)	, line 12	2)	1	,405,2	76.		329,	105.
	rants and si	ımılar amı	ounts paid (Part IX,	column (A), lir	es 1.3)								
	enefits paid	to or for i	members (Part IX, o	column (A), line	e 4)								
<b>=</b> 55 S∂	alaries <b>rothe</b>	ет сопре	Salion employee b	enefits (Part IX	, column (A), lu	nes 5-10	))						
-√6a Pi	rofessional	fundraisin	ig fees (Part IX, col	umn (A), line 1	le)								
. J III b To	otal fundrais	sing exper	oses (Part IX collife	in (D) line 25)	<b>.</b>		0.						
<b>Z</b> , 0	ther eviden	as MAY	xIcliumila, Ing	11a.11d 11f.	246			7	,348,5	98		305,	321
<b>Z</b> , ĭ	atal evdens	ac Add In	nses (Part IX, column XI column (A), Ing nes 13:17 (must) 64 BENDITAL (III) 18 f	ial Part IX coli	.mn (A) line 25	`			.,348,5			305,	
	evenuelless	- 2000 III	<u> 62 13:17 (11102)</u> 637	rom line 12	20 mil (A), ilile 23	,		1	56,6				784.
$\sum_{s=1}^{\infty}$	evenueness	CON SE	3 Banking things 10 1	OIII IIIIC 12				<u> </u>			F		
S)	otal assets (	(Part Y Iu	no 16)					Begi	nning of Y 829,6			of Yea	
	otal liabilitie	-							193,3			190,	
		=	•	01.6				<b></b>					
2 N		ure Bloc	ances Subtract line	21 from line 20	<u> </u>				636,3	07.		393 <b>,</b>	593.
11													
	Under penalite true, correct, a	s of perjury, and complete	l declare that I have exar e declaration of preparer	nined this return, in (other than officer)	cluding accompanyir is based on all inform	ig schedule nation of w	es and sta hich prep	atements, and arer has any	d to the best o knowledge	of my know	wledge and	belief, it	ıs
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	Signature	of officer	000	- , ,				Da	ate /	110			
	> Signature	1	٠ . ســــ	MIST	E.P -	- V1		- 1 ·					
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	ZIP + 4	نئ	" <u>"</u> - <del>"</del> - <del>"</del>	<del></del>				<u> </u>	hone no	•	1 1 52	la e i	l
ie IRS	3 discuss th	ıs return v	with the preparer sh	own above? (s	ee instructions,						Yes	X	No

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

Form 990 (2009)

TEEA0101 07/20/09

Form	1 990 (2009) ACTION MINISTRIES, INC	61-1330212	Page 2
Pai	t III Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission		
•	DISTRIBUTION OF FOOD TO LOW INCOME FAMILIES		
	IN KENTON COUNTY KENTUCKY		
2	Did the organization undertake any significant program services during the year which were not listed on		
	Form 990 or 990-EZ?	Yes X	No
_	If 'Yes,' describe these new services on Schedule O		*1-
3	Did the organization cease conducting, or make significant changes in how it conducts, any program ser	vices? Yes X	No
	If 'Yes,' describe these changes on Schedule O	the success Contract FO1(a)	(2)
4	Describe the exempt purpose achievements for each of the organization's three largest program services and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	allocations to others, the total	al
	expenses, and revenue, if any, for each program service reported	·	
4:	a (Code ) (Expenses \$ 291,801. including grants of \$ 36,000.)	(Revenue \$ _ 329,1	105.)
	ACTION MINISTRIES PROVIDED FOOD, PAPER PRODUCTS AND HOUSEHOLD G		,
	2238LOCAL FAMILES. THESE FAMILIES TOTALED 6362 INDIVIDUALS WIT		
	BEING UNDER THE AGE OF 18. IN ADDITION TO FOOD PURCHASED BY ACT		
	FOOD AND OTHER HOUSEHOLD PRODUCTS WERE DONATED BY BUSINESSES, S		UALS
	IN ADDITION TO THE LOCAL FAMILIES SERVED ON A MONTHLY BASIS, ACT		
	PROVIDED FOOD AND PAPER PRODUCTS TO FOOD PANTRIES, CHURCHES, SC	HOOLS AND	
	FAMILIES IN OHIO, KENTUCKY AND INDIANA. OVER 1, 255, 613 LBS WERE		
	IN 2009		
	~		
41	o (Code) (Expenses \$ including grants of \$)	(Revenue \$	)
4	(Code) (Expenses \$ including grants of \$)	(Revenue \$	)
		·	
4	d Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$ ) (Revenue	\$	
_4	e Total program service expenses ► 291,801.		

61-1330212 Page 3 Form 990 (2009) ACTION MINISTRIES, INC **Checklist of Required Schedules** Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 1 1 X Schedule A 2 Х Is the organization required to complete Schedule B, Schedule of Contributors? 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 Х Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C. Part II Δ Х 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 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to 6 provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, 6 Х Did the organization receive or hold a conservation easement, including easements to preserve open space, the 7 environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 Х Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV 9 Х 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 Х Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable 11 Х 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 167 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 Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 Х 12AWas the organization included in consolidated, independent audited financial statement for the tax No Yes year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A Х Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes' complete Schedule F 12 13 Х 1 Х

1.5	13 the digamental school described in section 176(b)(1)(4)(ii). If 7es, complete schedule E	13
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a
	<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes' complete Schedule F. Part II	15

16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III

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

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

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

Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

Х

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Checklist of Required Schedules (continued) Part IV

			Yes	NO
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21_		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22_		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х
<b>24</b> a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		х
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
<b>25</b> a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27_	_	Х
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		_	
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
c	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32_		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701·3? If 'Yes,' complete Schedule R, Part I	33_		х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34_		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule $R$ , Part $V$ , line $2$	35		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		_х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note. All Form 990 filers are required to complete Schedule O	38	х	
RΔΔ		Form	aan /	onna

			Yes	No
1	a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S  Information Returns Enter -0- if not applicable  1 a 0			
	b Enter the number of Forms W-2G included in line 1a Enter 0- if not applicable 1b 0			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		X
2	a 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			
2	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
	b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b		
4	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
	b If 'Yes,' enter the name of the foreign country ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			l-
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5 c		
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		X
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
	a 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		х
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
	e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	_		
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f	-	X
	g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	71 7a		X
	h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	79 7h		
8		<del>-/''</del>		-
·	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		х
9	Sponsoring organizations maintaining donor advised funds.			
	a Did the organization make any taxable distributions under section 4966?	9a		Х
	<b>b</b> Did the organization make any distribution to a donor, donor advisor, or related person?	9 b		Х
10	Section 501(c)(7) organizations. Enter			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	a Gross income from other members or shareholders			
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			

BAA

Form **990** (2009)

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

	Concario e des maracrona.				
Sec	tion A. Governing Body and Management		—		
	,	1		Yes	No
	Enter the number of voting members of the governing body	1a 13			·
١	Enter the number of voting members that are independent	1b 13			
2	Did any officer, director, trustee, or key employee have a family relationship or a business rela officer, director, trustee or key employee?	tionship with any other	2	x ~	1
3	Did the organization delegate control over management duties customarily performed by or uniof officers, directors or trustees, or key employees to a management company or other person	der the direct supervision	3		x
4	Did the organization make any significant changes to its organizational documents		4		X
	since the prior Form 990 was filed?				
5	Did the organization become aware during the year of a material diversion of the organization's	s assets?	5		Х
6	Does the organization have members or stockholders?		6		X
7 8	Does the organization have members, stockholders, or other persons who may elect one or mo governing body?	ore members of the	7 a		x
ı	Are any decisions of the governing body subject to approval by members, stockholders, or other	er persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions underta	aken during the year by			<del></del> ,
,	The governing body?		8 a	x	
	Each committee with authority to act on behalf of the governing body?		8b	$\frac{\hat{x}}{x}$	
	Is there any officer, director or trustee, or key employee listed in Part VII. Section A. who cann	ot be reached at the		^	
Soc	organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not i	consumed by the Internal	9		<u> </u>
	enue Code )	required by the interna-			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	100 0000 7	<del></del>	- I	Yes	No
10:	Does the organization have local chapters, branches, or affiliates?		10 a	163	X
	olf 'Yes,' does the organization have written policies and procedures governing the activities of sand branches to ensure their operations are consistent with those of the organization?	such chapters, affiliates,	10 ь		
11	Has the organization provided a copy of this Form 990 to all members of its governing body be	fore filing the form?	11		X
	A Describe in Schedule O the process, if any, used by the organization to review this Form 990	fore ming the form:	<del>  '                                   </del>		
	Does the organization have a written conflict of interest policy? If 'No,' go to line 13		12a		x
	Are officers, directors or trustees, and key employees required to disclose annually interests the	at could give rise	124		
	to conflicts?	at could give rise	12b		
•	Does the organization regularly and consistently monitor and enforce compliance with the police Schedule O how this is done	y? If 'Yes,' describe in	12c		
13	Does the organization have a written whistleblower policy?		13		X
14	Does the organization have a written document retention and destruction policy?		14		X
15	Did the process for determining compensation of the following persons include a review and appersons, comparability data, and contemporaneous substantiation of the deliberation and decisions.	pproval by independent			<del></del> ;
i	The organization's CEO, Executive Director, or top management official		15a		X
	Other officers of key employees of the organization		15b		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)				
16	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a entity during the year?	rrangement with a taxable	16a		х
1	of 'Yes,' has the organization adopted a written policy or procedure requiring the organization to in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the	o evaluate its participation			
	status with respect to such arrangements?		16b		
	tion C. Disclosures				
	List the states with which a copy of this Form 990 is required to be filed				- <b>-</b> -
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and inspection. Indicate how you make these available. Check all that apply.	d 990-T (501(c)(3)s only) ava	ılable	for pu	blic
	Own website				
19	Describe in Schedule O whether (and if so, how) the organization makes its governing docume statements available to the public	nts, conflict of interest policy	, and f	inanci	al
20	State the name, physical address, and telephone number of the person who possesses the boo	oks and records of the organi	zation		
1	TOM DORMAN 4375 BORON DR COVINGTON K	<u>Y41015(8</u>	<u>59) 2</u>	61-3	649

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Form 990 (2009)

BAA

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of 'key employees.'

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

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A)	(B)	(c)				(D)	(E)	(F)		
Name and Title	Average hours per week	हैं वार्तामान्य का निवस्त्व वार्तामान्य का	o anshluhonel tarslee	Check Offi →	a Key employee	B High est connects at employee	y) ru,nei	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099 MISC)	Estimated amount of other compensation from the organization and related organizations
THOMAS DORMAN EXECUTIVE DIRECTOR	40.00	х				<u> </u>		0.	0.	0.
BETH HUNTER ASSISTANT EXECUTIVE DIRECTOR	10.00	х						0.	0.	0.
KAY MISTLER DIRECTOR	10.00	Х						0.	0.	0.
LEE HUNTER DIRECTOR- CHAIR	10.00	х						0.	0.	0.
FRED BANTA DIRECTOR	25.00	Х						0.	0.	0.
LARRY MAINS DIRECTOR	10.00	Х						0.	0.	0.
BARBARA DORMAN DIRECTOR	10.00	х						0.	0.	0.
DAN MISTLER DIRECTOR- VICE CHAIR	10.00	Х						0.	0.	0.
BILLIE MCDANIEL DIRECTOR	10.00	Х			_			0.	0.	0.
SANDY BANTA DIRECTOR-TREASURER	25.00	Х						0.	0.	0.
DENNIS_BUSHDIRECTOR	30.00	Х						0.	0.	0.
ROGER BRADEN										<del></del>
DIRECTOR HAROLD_BUXTON	10.00	Х						0.	0.	0.
DIRECTOR-EMERITUS	1.00	Х						0.	0.	0.
							_			<del></del>

TEEA0107 11/10/09

Part VII   Section A. Officers, Directors, Trus	iees, r	<u>vey</u>	<u>L11</u>	ibic	ye	es,	alli	u mignest con	ipensateu Lii	ipioyees (cont.)
· (A)	(B)	_		(0				(D)	(E)	(F)
Name and Title	Average hours per week	,		Officer	_	A Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organization: (W 2/1099 MISC)	Estimated amount of other compensation from the organization and related organizations
					-					
				i						
	-									
1 b Total							<b>•</b>	0.	<u> </u>	0.
2 Total number of individuals (including but not limited	to those	e lis	ted a	abov	/e) v	who	гесе	eived more than \$	100,000 in reporta	able compensation
from the organization										
<ul> <li>3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in</li> <li>4 For any individual listed on line 1a, is the sum of repthe organization and related organizations greater the individual</li> <li>5 Did any person listed on line 1a receive or accrue companies.</li> </ul>	<i>dividual</i> portable an \$150	com ),00(	pen )? <i>[[</i>	sation of the sa	on a s' c	ind o	othei elete	r compensation fro Schedule J for su	om ch	3 X
5 Did any person listed on line 1a receive or accrue correndered to the organization? If 'Yes,' complete Scholestion B. Independent Contractors	edule J	for s	uch	per.	son	11161	aleu			5 X
1 Complete this table for your five highest compensate	d indep	ende	ent c	contr	racte	ors t	that	received more tha	in \$100,000 of	
compensation from the organization (A)	-							(B	)	(C)
Name and business addres	s							Description	of Services	Compensation
								ļ		
2 Total number of independent contractors (including t \$100,000 in compensation from the organization ▶	out not I	ımıte	ed to	tho	se I	ıste	d ab	ove) who received	d more than	

Га	t viii Statement	Of Iveverine		<del>-</del>	745	(D)	(0)	(3)
	•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S	1 a Federated campa	ainns	1 a					0.2, 0.0, 0.0.
N S IN	<b>b</b> Membership due:	-	1 b					
O C	c Fundraising ever		1 c	1 001				
TS.	c rundraising ever		-	1,891.				
F	<b>d</b> Related organiza		1 d					
S Z	e Government grants (c	contributions)	1 e	36,000.				
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contribution	s. oifts, orants, and				•		
BE	similar amounts not i	ncluded above	1 f	290,573.				
F O	g Noncash contribns in	cluded in Ins 1a-1f	\$	190,347.				
Ş₹	h Total. Add lines	1a-1f	_	<b>&gt;</b>	328,464.			
JE		· <del>-</del> -		Business Code				
EN	2a						`	
Ě	b							
E.	ŭ							
Ž	c		-				<u> </u>	
SE	d		+				ļ	
₹	e		-	<del></del>				
8	f All other program	n service revenue	e L					
Ě	g Total. Add lines :	2a-2f		<b></b>				
	3 Investment incon	ne (includina div	ıdends.	interest and				
	other similar amo	ounts)	,	<b>&gt;</b>	641.	0.	0.	641.
	4 Income from inve	estment of tax-ex	kempt b	ond proceeds				
	5 Royalties			•				
	•	(i) R	eal	(ii) Personal	· · · · · · · · · · · · · · · · · · ·			
	6a Gross Rents					·		
	<b>b</b> Less rental expe	anses -						•
	c Rental income or (los							
		·				***		
	d Net rental income	(1) See		<del></del>		<del></del>		
	7a Gross amount from sa	ales of	urities	(II) Other				
	assets other than inve	entory		<del></del>				
	<b>b</b> Less cost or other ba	asis						
	and sales expenses							
	c Gain or (loss)							
[	d Net gain or (loss)	)		<b>•</b>				
	8a Gross income fro	om fundraising e	vents					- <del> </del>
필	(not including \$	1,8	91.					
	of contributions r	eported on line	lc)			,		
OTHER REVE	See Part IV, line		a	,				
Ħ.	<b>b</b> Less direct expe		ь					
5	c Net income or (lo		-	´—		7 #	-	
			-	Territo .				
	9a Gross income fro See Part IV, line	m gaming activi	ties					
	<b>b</b> Less direct expe		. b	` <u> </u>				
	c Net income or (lo	oss) from gaming	g activit	lies		· · · · · · · · · · · · · · · · · · ·		
	10a Gross sales of in	ventory, less ret	urns					
	and allowances		а	)				
	<b>b</b> Less, cost of goo	ds sold	b	) <u> </u>				
- 1	c Net income or (lo	oss) from sales o	f inven	itory -				
[	Miscellaneo			Business Code				
	11a							
	L							
i	~			<del></del>			<del></del>	
	d All other revenue			<del></del>				
	· · · · · · · · · · · ·		L	<u> </u>		<del></del>		
	e Total. Add lines				000 505			
$\Box$	12 Total revenue. S	ee instructions			329,105.	0.	0.	641.

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Program service Management and expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 10 Payroll taxes Fees for services (non-employees) a Management **b** Legal c Accounting d Lobbying e Prof fundraising svcs See Part IV, In 17 f Investment management fees g Other 826 826 0. 12 Advertising and promotion 3,899. 3,899. 0. Office expenses 0. 13 Information technology Royalties 15 16 Occupancy 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 13,151 20 Interest 9,995 3,156 0. 21 Payments to affiliates 11,561 0. 9,249 2,312 22 Depreciation, depletion, and amortization 3,722 4,653. 931 0. 23 Insurance Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 16,108 12,886. 3,222. a UTILITIES/PHONE 0. b FOOD 245,049. 245,049. 0. 0. c MAINT/REPAIRS/GAS 5,078 5,078 0. 0. d LICENSE/REGISTRAION 191. 0. 191. 0. e MISC\_\_\_\_ 4,805. 4,805. 0. 0. f All other expenses 305,321 291,801 13,520 0. 25 Total functional expenses Add lines 1 through 24f Joint costs. Check here ► I 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 BAA Form 990 (2009) Part X **Balance Sheet** Beginning of year End of year 32,211 1 57,827. Cash - non-interest-bearing ٠1 2 67.786. 2 Savings and temporary cash investments 66,631 3 3 Pledges and grants receivable, net 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 6 7 Notes and loans receivable, net 289,816 8 29,202. Inventories for sale or use 9 9 Prepaid expenses and deferred charges 10a 10a Land, buildings, and equipment cost or other basis 550,287 Complete Part VI of Schedule D 10b **b** Less accumulated depreciation 120,861 440,987 10 c 429,426. 11 Investments - publicly-traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 Other assets See Part IV, line 11 15 15 829,645 Total assets Add lines 1 through 15 (must equal line 34) 16 584,241 16 Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 Secured mortgages and notes payable to unrelated third parties 193,338 23 23 190,648. 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 193,338 26 190,648. Organizations that follow SFAS 117, check here ► and complete lines 27 through 29 and lines 33 and 34. Unrestricted net assets 27 28 28 Temporarily restricted net assets Permanently restricted net assets 29 R X and complete Organizations that do not follow SFAS 117, check here lines 30 through 34. E UZD 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, and equipment fund BALANCES Retained earnings, endowment, accumulated income, or other funds 636,307. 32 393,593. 33 Total net assets or fund balances 636,307. 33 393,593. 34 Total liabilities and net assets/fund balances 829,645. 584,241. Form 990 (2009) BAA

TEEA0111 01/30/10

Form <b>990</b> (2009) ACTION MINISTRIES, INC 61-133	30212	Pa	age <b>12</b>
Part XI Financial Statements and Reporting			
		Yes	No
1 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			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b Were the organization's financial statements audited by an independent accountant?	2b		Х
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the autreview, or compilation of its financial statements and selection of an independent accountant?	dit,		
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 consolidated basis, separate basis, or both.	a		
Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required a or audits, explain why in Schedule O and describe any steps taken to undergo such audits	udit 3b		

BAA

Form 990 (2009)

#### SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

2009

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Name of	the org	anization			-				Employe	r identificat	tion number		
ACTI		MINISTRIES			_					330212			
Part	I R	eason for Pu	blic Charity Statu	s (All organizations	must o	comple	ete this	part.	See i	nstruct	ions		
The or				se it is (For lines 1 throu									
1 [	A	church, convention	on of churches or asso	ciation of churches desci	ribed in	section	170(b)(1	)(Á)(i).					
2				(A)(ii). (Attach Schedule E				~ ~ ~ ~					
3				organization described i		n 170/h	γ1γΑγί	i)					
4	_		•	d in conjunction with a ho				•	'hV1V^\	(iii) Ento	r the been	talle	
٠, ١		me, city, and sta		a in conjunction with a ne	spital ut	-scribeu	III Secti	011 170(	עאאיאט	(iii) Line	ii tile ilospi	lai 5	
5 [	nA [	organization ope		of a college or university	owned o	r operat	ed by a	governi	mental u	ınıt descr	ibed in sec	tion	
6	] A :	federal, state, or	local government or g	overnmental unit describ	ed in <b>se</b>	ction 17	'0(b)(1)(	4)(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)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)												
8 L						•							
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 org	anized and operated	exclusively to test for pub	lic safet	y See s	section !	509(a)(4	).				
11 [	mo	ore publicly suppi	orted organizations de	exclusively for the benefit escribed in section 509(a ation and complete lines	)(1) or s	ection 5	09(a)(2)	ions of, See s	or carry e <b>ction 5</b>	out the <b>09(a)(3).</b>	purposes o Check the	f one o	or hat
	а	Type I	<b>b</b> ☐ Type II	c Type III	l – Fund	tionally	integrat	ed		αП	Type III-	Other	
е [													
f	If t	. , . ,	eceived a written dete	ermination from the IRS th	hat is a	Type I, T	Гуре II с	r Type	II suppo	rting org	anızatıon,		
g	Sır	nce August 17, 20	006, has the organizat	ion accepted any gift or	contribu	tion fror	n any of	the foll	owing p	ersons?	{	Yes	No
	(i)	below, the go	verning body of the su	ontrols, either alone or to pported organization?	ogether v	with pers	sons des	scribed	ın (II) an	ıd (ııı)	11 g (i)		
	(ii)	a family mem	ber of a person descr	ribed in (i) above?							11 g (ii)		
	(iii	•		described in (i) or (ii) ab-							11 g (iii)		L
<u>h</u>	Pro	ovide the following	g information about th	e supported organization	s								
		me of Supported Organization	(ii) EIN	(lii) Type of organization (described on lines 1 9 above or (RC section (see instructions))	organizat (i) lister gove	Is the tion in cold in your triing ment?	the organ	ou notify ization in (I) of upport?	organizat	s the ion in col- zed in the S ?	(vlı) Amoun	t of Sup	port
					Yes	No	Yes	No	Yes	No			
				· · · · · · · · · · · · · · · · · · ·									
					}		}						
		<u></u>											
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		-			<del>                                     </del>	<del> </del>	<del>                                     </del>			<del>  </del>			
					1		Ì						
	·· ·-		<del></del>	<del></del>	<del>                                     </del>	l				<del>                                     </del>			
Total						ļ							
	or Priv	acy Act and Paperw	ork Reduction Act Notice,	see the Instructions for Form	990 or 990	)-EZ	l		Schedul	e <b>A</b> (Forr	n 990 or 99	0-EZ)	2009

Sec	(Complete only if you checke tion A. Public Support	ed the box on line	5, 7, or 8 of Part	1)						
Cale	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total			
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')									
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf									
3	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge									
4 5	Total. Add lines 1-through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)									
6	<b>Public support.</b> Subtract line 5 from line 4									
Sec	tion B. Total Support									
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total			
7	Amounts from line 4									
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources									
9	Net income from unrelated business activities, whether or not the business is regularly carried on									
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)									
11	Total support. Add lines 7 through 10									
12	Gross receipts from related activi	ities, etc (see ins	tructions)			12				
13	First five years. If the Form 990 organization, check this box and	s for the organiza	ation's first, secon	d, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ [			
Sec	tion C. Computation of Pu									
14	Public support percentage for 200		•	e 11, column (f)		14	%			
15	Public support percentage from 2	2008 Schedule A,	Part II, line 14			15	%			
16 a	33-1/3 support test — 2009. If the and stop here. The organization	e organization did qualifies as a pub	not check the box licly supported or	on line 13, and t ganization	the line 14 is 33-1	/3 % or more, chec	k this box			
t	33-1/3 support test — 2008. If the and stop here. The organization	e organization did qualifies as a pub	not check a box of licly supported or	on line 13, or 16a, ganization	and line 15 is 33-	1/3% or more, chec	ck this box			
17 <i>a</i>	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.									
	o 10%-facts-and-circumstances te or more, and if the organization r organization meets the 'facts-and	meets the 'facts-a d-circumstances'	nd-circumstances test The organiz	' test, check this b ation qualifies as	ox and stop here. a publicly supported	Explain in Part IV ed organization	how the ►			
18	Private foundation. If the organiz	zation did not che	ck a box on line,	13, 16a, 16b, 17a,						
BAA	1				Sc	chedule A (Form 99	u or 990-EZ) 2009			

# Schedule A (Form 990 or 990-EZ) 2009 ACTION MINISTRIES, INC Part III Support Schedule for Organizations Described in Section 509(a)(2)

Sec	<ul> <li>(Complete only if you chec</li> </ul>	ked the box on lin	e 9 of Part I)				
	tion A. Public Support						
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	148,354.	232,140.		1,432,601.	328,464.	3,458,459.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513			<del>-, ,</del> ,,,			
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, 3 received from disqualified persons	148,354.	232,140.	1,316,900.	1,432,601.	328,464.	3,458,459.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
С	: Add lines 7a and 7b		_				
8	Public support (Subtract line						
	7c from line 6)						3,458,459.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	148,354.	232,140.	1,316,900.	1,432,601.	328,464.	3,458,459.
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	2 652					
b		3,653.	3,376.	4,145.	-27,325.	641.	-15,510.
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	income (less section 511 taxes) from businesses	3,653.	3,376.	4,145.	-27,325.	641.	-15,510.
11	income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is		3,376.	4,145.	-27,325.	641.	-15,510.
11	income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (add ins 9, 10c, 11, and 12.)	3,653.					3,442,949.
11 12 13 14	income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12)  First five years. If the Form 990 in organization, check this box and	3,653. s for the organizat	ion's first, second				3,442,949.
11 12 13 14 Sec	income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).  Total support. (add Ins 9, 10c, 11, and 12). First five years. If the Form 990 is organization, check this box and tion C. Computation of Pul	3, 653. s for the organization here	ion's first, second ercentage	i, third, fourth, or		section 501(c)(3)	3,442,949.
11 12 13 14 Sec 15	income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).  Total support. (add lins 9, 10c, 11, and 12). First five years. If the Form 990 is organization, check this box and tion C. Computation of Pul. Public support percentage for 200.	s for the organization here blic Support P 09 (line 8, column	ion's first, second ercentage (f) divided by line	i, third, fourth, or		section 501(c)(3)	3,442,949. ► □
11 12 13 14 Sec 15 16	income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (add ins 9, 10c, 11, and 12.)  First five years. If the Form 990 is organization, check this box and tion C. Computation of Pul Public support percentage from 200.	s for the organization here Diic Support P 09 (line 8, column 008 Schedule A, F	ion's first, second ercentage (f) divided by line Part III, line 15	d, third, fourth, or e 13, column (f))		section 501(c)(3)	3,442,949.
11 12 13 14 Sec 15 16 Sec	Income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add ins 9, 10c, 11, and 12)  First five years. If the Form 990 in organization, check this box and tion C. Computation of Pul  Public support percentage for 200.  Public support percentage from 2 tion D. Computation of Inv	s for the organization here blic Support P 09 (line 8, column 008 Schedule A, F	ion's first, second ercentage (f) divided by line Part III, line 15 ne Percentage	f, third, fourth, or 13, column (f))	fifth tax year as a	section 501(c)(3)	3,442,949. The state of the st
11 12 13 14 Sec 15 16 Sec 17	Income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (add lins 9, 10c, 11, and 12.)  First five years. If the Form 990 in organization, check this box and tion C. Computation of Pull Public support percentage for 200. Public support percentage from 2 tion D. Computation of Inv.	s for the organizate stop here blic Support P 9 (line 8, column 008 Schedule A, Festment Incon r 2009 (line 10c, co	ercentage (f) divided by line Part III, line 15 ne Percentage	t, third, fourth, or 13, column (f))	fifth tax year as a	section 501(c)(3)  15  16	3,442,949. ► □  100.45%  100.29%  -0.45%
11 12 13 14 Sec 15 16 Sec 17 18	Income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).  Total support. (add lins 9, 10c, 11, and 12). First five years. If the Form 990 in organization, check this box and tion C. Computation of Pull Public support percentage for 200. Public support percentage from 2 tion D. Computation of Inv. Investment income percentage for linvestment income percentage for five support percentage for linvestment income percentage for five support percentage for linvestment income percentage for linvestment income percentage for five support percentage for linvestment income percentage for linvestment income percentage for line in the support percentage for linvestment income percentage for line in the support percentage for line in the line in the line in the support percentage for line in the line	s for the organizate stop here blic Support P 09 (line 8, column 008 Schedule A, Festment Incomer 2009 (line 10c, com 2008 Schedule	ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided A, Part III, line 1	t, third, fourth, or 13, column (f)) by line 13, column 7	fifth tax year as a	15   16   17   18	3,442,949. ► □ 100.45% 100.29% -0.45% -0.29%
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Schedule	A (For	m 990 or 9	990-EZ)	2009	ACTI	ON	MINIS	TRIES,	INC			61-1330212	2 Page <b>4</b>
Part IV	Sur	plemer	ital Infe	ormat	ion. Co	amol	ete th	is part to	provide	e the	explanations re r additional info	quired by Part	II. line 10:
	Par	t II, line	17a oi	r 17b,	and P	art I	II, line	12. Pro	vide any	othe	r additional info	rmation. See ii	nstructions.
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#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

# Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions OMB No 1545 0047

2009

Open to Public Inspection

Employer Identification number

ACTION MINISTRIES, INC 61-1330212 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit?? No Part II | Conservation Easements Complete if the organization answered 'Yes' to Form 990, Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06 24 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear ▶ Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds? No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990. Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

chedule <b>D</b> (Form 990) 2009 ACTIO				61-133	
art III Organizations Mainta	ining Collecti	ons of Art, Histo	rical Treasures, o	or Other Similar Ass	ets (continued)
3 Using the organization's acquisition (check all that apply)	on accession and	other records, check	any of the following t	that are a significant use	of its collection
a* Public exhibition		d Loan o	r exchange programs		
<b>b</b> Scholarly research		e [ ] Other			
c Preservation for future gener					
<ul> <li>4 Provide a description of the organ Part XIV</li> <li>5 During the year, did the organizar</li> </ul>					ın
5 During the year, did the organizar assets to be sold to raise funds ra	ather than to be r	naintained as part of	the organization's col	lection?	Yes No
Part IV Escrow and Custodia 9, or reported an amo	I Arrangemer ount on Form	<b>its</b> Complete if o 990, Part X, line	rganization answi 21.	ered 'Yes' to Form 9	90, Part IV, line
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian, o	r other intermediary f	or contributions or oth	er assets not	Yes No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV and o	complete the following	j table		
					Amount
c Beginning balance				1 c	
d Additions during the year				1 d	
e Distributions during the year				1 e	<del></del>
f Ending balance				1f	<del></del>
2a Did the organization include an a		90, Part X, line 21?			∐ Yes ∐ No
b if 'Yes,' explain the arrangement		nizotion ongwer	ad IV and the Forms (	200 David IV June 10	
art V Endowment Funds Co	(a) Current yea				(e) Four years bac
1a Beginning of year balance	(a) Current yea	(b) Prior year	(c) Two years ba	dck (d) Three years back	(e) Four years bac
<b>b</b> Contributions					
c Net Investment earnings, gains, and losses					
d Grants or scholarships			``		
<ul> <li>Other expenditures for facilities and programs</li> </ul>					
f Administrative expenses					
<b>g</b> End of year balance				<u>.                                    </u>	<u> </u>
2 Provide the estimated percentage	e of the year end	balance held as			
a Board designated or quasi-endow	/ment ►	%			
b Permanent endowment	8				
c Term endowment	<del></del> 8				
3a Are there endowment funds not in	n the possession	of the organization th	at are held and admir	nistered for the	
organization by					Yes N
(i) unrelated organizations				•	3a(i)
(ii) related organizations					3a(ii)
b If 'Yes' to 3a(II), are the related o	-	•			3b
4 Describe in Part XIV the intended				V line 10	
Part VI Investments—Land, B  Description of investment		Cost or other basis		(c) Accumulated	(d) Deals Value
Description of investment		(investment)	(b) Cost or other basis (other)	Depreciation	(d) Book Value
1 a Land		153,500.			153,50
<b>b</b> Buildings		303,300.		60,669.	242,63
c Leasehold improvements		9,145.	_	1,769.	7,37
<b>d</b> Equipment		84,342.	_	58,423.	25,91
e Other					
				1	

(a) Description of security or category (b) Book value (c) Method of valuation (cost or end-of-year market value (cost or end-of-year market v	Part VII	Investments—Other Securities See	orm 990, Part X, line I	2	
Closely-held equity interests Other  Total (Column (b) must equal Form 990 Part X, col (B) line 12)  Part VIII Investments—Program Related (See Form 990, Part X, Ine 13)  (a) Description of investment type (b) Book value Cost or end-of-year market value  Total (Column (b) must equal Form 990, Part X, Ine 15)  (a) Description (b) Book value (c) Method of valuation Cost or end-of-year market value  (b) Book value (c) Method of valuation (c) Total (c) Method of valuation (e) Book value (f) Book value (g) Description (h) Book value  Total (Column (b) must equal Form 990, Part X, col (B), line 15)  Forart X Other Liabilities (See Form 990, Part X, tine 25) (a) Description of Liability (b) Amount	•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market	on et value
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Federal Income Taxes			(b) Amount		
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Total (Column (b) must equal Form 990, Part X, col (B) line 25) •  2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liabil				L	<del> </del>

Schedule D (Form 990) 2009 ACTION MINISTRIES,

61-1330212

Page 3

Schedule D (Form 990) 2009 ACTION MINISTRIES, INC		61-1330212	Page 4
Part XI Reconciliation of Change in Net Assets from Form 99	00 to Financial Staten		
1 Total revenue (Form 990, Part VIII,column (A), line 12)			
2 Total expenses (Form 990, Part IX, column (A), line 25)		· · · · ·	
3 Excess or (deficit) for the year Subtract line 2 from line 1			
4 Net unrealized gains (losses) on investments			
5 Donated services and use of facilities		*	
6 Investment expenses			
7 Prior period adjustments			
8 Other (Describe in Part XIV)		· · · · · · · · · · · · · · · · · · ·	<del> </del>
9 Total adjustments (net) Add lines 4 through 8		<del></del>	
10 Excess or (deficit) for the year per audited financial statements. Combine	lines 2 and 0		
Part XII   Reconciliation of Revenue per Audited Financial State		e ner Beturn	
1 Total revenue, gains, and other support per audited financial statements	terrierres vvidir revenu	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		<del> -'- </del>	
a Net unrealized gains on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2 c	<del></del>	
d Other (Describe in Part XIV)	2d		
e Add lines 2a through 2d			
3 Subtract line 2e from line 1	1 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		·	
a Investments expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIV)	4b		
c Add lines 4a and 4b		4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	
Part XIII   Reconciliation of Expenses per Audited Financial St	atements With Expen	ses per Return	
1 Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1		
a Donated services and use of facilities	2 a		
<b>b</b> Prior year adjustments	2b		
c Other losses	2c		
d Other (Describe in Part XIV)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			·
a Investments expenses not included on Form 990, Part VIII, line 7b	4a		
<b>b</b> Other (Describe in Part XIV)	4b		
c Add lines 4a and 4b	<del></del>	4c	
5 Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line	<u>- 18 \</u>	5	
Part XIV   Supplemental Information		1 3 1	
Complete this part to provide the descriptions required for Part II, lines 3, 5, and line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, line information	9; Part III, lines 1a and 4, s 2d and 4b Also complete	Part IV, lines 1b and 2b; Pa this part to provide any add	rt V, litional
			_ <b></b>
BAA TEE 03204 02/02/	<del></del>	Schodula D /Form	0000 0000

Schedule D (Form 990) 2009 ACTION MINISTRIES, INC	61-1330212	Page 5
Schedule D (Form 990) 2009 ACTION MINISTRIES, INC Part XIV   Supplemental Information (continued)		<del></del>
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#### SCHEDULE M (Form 990)

**Noncash Contributions** 

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

OMB No 1545 0047

2009

Department of the Treasury Internal Revenue Service

ACTION MINISTRIES, INC

► Attach to Form 990.

Open To Public Inspection

Employer identification number

61-1330212

Par	t I   Types of Property		<u> </u>	····				
		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Metho	od of corever	determin	ing
1 2 3 4 5 6 7 8 9 10 11	Art—Works of art Art—Historical treasures Art—Fractional interests Books and publications Clothing and household goods Cars and other vehicles Boats and planes Intellectual property Securities—Publicly traded Securities—Closely held stock Securities—Partnership, LLC, or trust interests Securities—Miscellaneous							
13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28	Qualified conservation contribution— Historic structures  Qualified conservation contribution—Other Real estate—Residential Real estate—Commercial Real estate—Other  Collectibles Food inventory  Drugs and medical supplies  Taxidermy  Historical artifacts  Scientific specimens  Archeological artifacts  Other ► ()  Other ► ()  Other ► ()	X	500	190,347.	AVERAG	GE OI	F FOO	DBANK
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Dones	on during the Acknowledg	tax year for contribution gement	ns for which the	29		Yes	No
	During the year, did the organization receive by co- hold for at least three years from the date of the in- purposes for the entire holding period?  If 'Yes,' describe the arrangement in Part II	intribution an iitial contribu	y property reported in F tion, and which is not ri	Part I, lines 1-28 that it equired to be used for e	must exempt	30 a		X
	Does the organization have a gift acceptance police	v that require	es the review of any so	n.standard contribution	c?	21	v	
	Does the organization have a gift acceptance point Does the organization hire or use third parties or r noncash contributions?		-		oʻ ,	31 32a	X	Х
b	If 'Yes,' describe in Part II.							
33	If the organization did not report revenues in colum	nn (c) for a t	ype of property for whic	h column (a) is checke	d,			
	describe in Part II.			.,				
BAA	For Privacy Act and Paperwork Reduction Act No	tice, see the	Instructions for Form	990.	Schedu	le M (	Form 99	0) 2009

Schedule M (Form 990) 2009 ACTION MINISTRIES, INC	61-1330212	Page 2
Schedule M (Form 990) 2009 ACTION MINISTRIES, INC  Part II Supplemental Information. Complete this part to provide the information require and 33. Also complete this part for any additional information.	d by Part I, lines 30	b, 32b,
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*		
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		. <b></b>
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	<b></b>	

## SCHEDULE O (Form 990)

# **Supplemental Information to Form 990**

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Name of the organization	Employer identification number
ACTION MINISTRIES, INC	61-1330212
Pt VI-A, Line 2 THOMAS DORMAN AND BARBARA DORMAN ARE MARRIE	D
LEE HUNTER AND BETH HUNTER ARE MARRIED	
DAN MISTLER AND KAY MISTLER ARE MARRIED	
FRED BANTA AND SANDY BANTA ARE MARRIED	
Pt III, Line 2 NO CHANGE	
Pt III, Line 3 NO CHANGE	
Pt V, Line 3b NO CHANGE	
Pt VI-A, Line 3 NO CHANGE	
Pt_VI-A, Line 4 NO CHANGE	
Pt_VI-A, Line 5 NO CHANGE	
Pt_VI-A, Line 6 NO CHANGE	
Pt_VI-A, Line 7a_NO_CHANGE	
Pt_VI-A, Line 7b_NO_CHANGE	
Pt_VI-A, Line 8a THE SECRETARY DOCUMENTS	
Pt_VI-A, Line 8b COMMITTEES REPORT TO THE BOARD	
Pt VI-B, Line 10b NO CHANGE	
Pt VI-B, Line 11A NO CHANGE	
Pt_VI-B, Line 12c_NO_CHANGE	
Pt_VI-B, Line 15 NO COMPENSATION	
Pt_VI-C, Line 19 ON FILE ON PREMISES	
Pt_XI, Line 1 N/A	
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