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Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Department of the Treasury

G Check all that apply: Initial return Initial return of a former public charity Amended return Address change Name change Use the IRS label. Otherwise, PHE MUSTARD SEED FOUNDATION Number and street for PO box number if mail is not delivered to street address) Pirint or type. See Specific Instructions H Check type of organization: X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at end of year J Accounting method: Cash X Accrual (from Part II, col (c), line 16) See Specific (Part I, column (d) must be on cash basis) Part 1 Analysis of Revenue and Expenses (the total of amounts in columns (b), (c), and (c) may not necessarily equal the amounts in columns (b), (c), and (c) may not necessory equal the amounts in columns (b), (c), and (c) may not necessory equal the amounts in columns (b), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not necessory equal the amounts in columns (c), (c), and (c) may not neceso	_	_	venue Service Note. The foundation may t	be able to use a copy of this	 	rting requirements.	
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2 Check Discost Similar Simila			necessarily equal the amounts in column (a))		iliconie		(cash basis only)
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Page 2 Captral works and interest from securities		2					OMA MENTER 1
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Form 990-PF (2009)

Form 990-PF (2009)

1,179,646.

541,514.

7

Add lines 5 and 6

See the Part VI instructions.

Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

Form 990-PF (2009) THE MUSTARD SEED FOUNDATION			<u>0910</u>		Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e)	, or 494	3 - see	instru	ctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		ł			
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	· 1				0.
of Part I, line 27b		-			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	_ 2				0.
3 Add lines 1 and 2	3				0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6 Credits/Payments:					
a 2009 estimated tax payments and 2008 overpayment credited to 2009 6a					
b Exempt foreign organizations - tax withheld at source 6b					
c Tax paid with application for extension of time to file (Form 8868)					
d Backup withholding erroneously withheld 6d					
7 Total credits and payments. Add lines 6a through 6d	7				0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9				0.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	> 10				
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax	·				
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or in	tervene in			Yes	No
any political campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for defini	tion)?		1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials po	-	•			
distributed by the foundation in connection with the activities					!
c Did the foundation file Form 1120-POL for this year?			10		Х
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$	0.				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
managers. ► \$ 0.					
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Х
If "Yes," attach a detailed description of the activities					
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorpor	ration, or				
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	, .		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		<u> </u>
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		Х
If "Yes," attach the statement required by General Instruction T		-			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
By language in the governing instrument, or					
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with t	he state law				
remain in the governing instrument?			6	х	
7 Did the foundation have at least \$5,000 in assets at any time during the year?			7	Х	
If "Yes," complete Part II, col. (c), and Part XV.					
8a Enter the states to which the foundation reports or with which it is registered (see instructions)					
KY			-		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		-	·		
of each state as required by General Instruction G? If "No," attach explanation			8b	х	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)	for calendar				<u> </u>
year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresse	s		10		X

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Form 990-PF (2009)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Form 990-PF (2009) THE MUSTARD SEED FOUNDAT	ION AZOO Man Ba F	.	61-13909	10 <u>Page 6</u>
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Requirea (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire		- T	
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			1 1
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			
the prevention of cruelty to children or animals?	•	Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i	n Regulations	1	
section 53 4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	nere .	-		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined		
expenditure responsibility for the grant?	N	Ī/A	s No	
If "Yes," attach the statement required by Regulations section 53 494.	5-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	s X No	
b If yes, did the foundation receive any proceeds or have any net income attribut	able to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	1	
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	(e) Expense account, other allowances
JOHN S. SAWYER	DIRECTOR	enter-o-)	Compensation	anowanices
3120 WALL STREET, SUITE 310	DIRECTOR			
LEXINGTON, KY 40513	4.00	0.	o .	0.
	DIRECTOR	-	•	
4120 PISGAH PIKE	DIRECTOR			
VERSAILLES, KY 40383	4.00	0.	0.	0.
	DIRECTOR			
DUDLEY AVENUE	DIRECTOR			
LEXINGTON, KY 40502	2.00	0.	0.	0.
	DIRECTOR	· · · · · · · · · · · · · · · · · · ·		<u></u>
200 BIG RUN ROAD	DIRECTOR			
LEXINGTON, KY 40503	4.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc			0.1	<u> </u>
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plansand deterred	(e) Expense account, other allowances
NONE	devoted to position		compensation	
NONE	İ			
		 		
	1			
	1			
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· · · · · · · · · · · · · · · · · · ·	1			
Total number of other employees paid over \$50,000	<u> </u>	J		0
Carrier Control Contro				

Form 990-PF (2009) THE MUSTARD SEED FOUNDATION	<u> 51-1390</u>	910 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	:e	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 SUPPORT FOR TEAM IN DUBAI FOR LIVING & MINISTRY EXPENSES, AND AN INTERN TRAINING PROGRAM TO TRAIN FUTURE STAFF WORKER FOR VARIOUS CAMPUS LOCATIONS IN THE ARABIAN PENINSULA. 2 A MINISTRY IN NORTHERN IRELAND, INCLUDING SHORT TERM TRIPS BY TEAMS OF LOCAL HIGH SCHOOL STUDENTS AND SOME LONGER TERM SUPPORT OF STAFF AND MINISTRY EXPENSES IN IRELAND. 3		523,959. 18,716.
Part IX-B Summary of Program-Related Investments		 ,
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
2		
All other program-related investments. See instructions. 3		
Table Addition of Abratish 2		
Total. Add lines 1 through 3		0.

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndations, s	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	81,010.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	81,010.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	81,010.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,215.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	79,795.
6	Minimum investment return. Enter 5% of line 5	6	3,990.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	3,990.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,990.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,990.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,990.
P	art XII Qualifying Distributions (see instructions)	·····	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	541,514.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	541,514.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		^
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	541,514.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualities for	the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2004 not applied on line 5 or line 7 9 Excess distributions carryover to 2010 Subtract lines 7 and 8 from line 6a 0 Analysis of line 9 a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008 569,571.		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
2 Undestrouded morem. Farm, as not the end of zone a finite amount for 2008 only b Total for prior years. 3 Excess distributions carryover, if any, to 2009: a From 2004 159, 169. b From 2005 380, 451. c From 2006 458, 9.07. c From 2006 458, 9.07. c From 2006 592, 20.27. c From 2008 569, 571. c From 2008 56		XI,			3 990.
Excess distributions carryover, if any, to 2009: a From 2004		an I	<u> </u>		3,330.
3 Excess distributions carryover, if any, to 2008: a From 2004	- · · · · · · · · · · · · · · · · · · ·			0	
3 Excess distributions carryover, if any, to 2009: a From 2004	-			0.	
3 Excess distributions carryover, if any, to 2005: a From 2004	g rotarior prior years.		0		
From 2005	3 Excess distributions carryover, if any, to	2009:	0.		
From 2005	a From 2004 159,1	69.			
From 2005					
Firm 2007 592, 027.					
From 2008					
1 Total of lines 3 th through e 4 Qualifying distributions for 2009 from Part XII, Inet * № 5 S41, 514 . 4 Applied to 2008, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus for several report of the action of the same amount for the next total of each column as indicated below: a Corpus Adaltines 31, 4c, and 4e Submatch line a bit from line 2b c Inter the amount of prior years' undistributed control for which a notice of the section 494(2) tax has been previously assessed d Subtract line 6c from line 6b. Taxable amount - see instructions d Subtract line 6c from line 6b. Taxable amount - see instructions to Undistributed income for 2009. Subtract line 4 for for line 2. Taxable amount - see instructions to Undistributed income for 2009. Subtract line 4 for for line 1. This amount must be distributed in 2010 O. Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b(1)(F)) or 942(g)(3) Subtract lines 7 and 6 from line 6a O. Analysis of line 7 Excess form 2005 Subtract lines 6a 380, 451, be excess form 2007 See Excess form 2005 Subtract lines 7 and 6 from line 6a Captas Subtract lines 8 and 5 from line 6a Captas Subtract lines 8 and 5 from line 6a Captas Subtract lines 8 and 5 from line 6a Captas Subtract lines 8 and 5 from line 6a Captas Subtract lines 9 and 6 from line 6a Captas Subtract lines 9 and 6 from line 6a Captas Subtract lines 9 and 6 from line 6a Captas Subtract lines 9 and 6 from line 6a Captas Subtract lines 9 and 6 from line 6a Captas Subtract lines 9 and 6 from line 6a Captas Subtract lines 9 and 6 from line 6a Captas Subtract lines 9 and 6 from line 6a Captas Subtract lines 9 and 6 from line 6a Captas Subtract lines 9 and 6 from line 6a Captas Subtract lines 9 and 6 from line 6a Captas Subtract lines 9 and 6 from line 6a Captas Subt					
4 Outsilving distributions for 2009 from Part XII, line 4: № \$ 541,514, a Applied to 2008, but not more than line 2a		- 1			
Part XII, line 4: P\$ 541,514. a Applied to 2006, but not more than line 2a by Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 537,524. 5 Excess distributions curryower applied to 2009 (first amount appears in ecotion (Fig. 4) the same amount must be aboven in column (a)) 5 Enter the net total of each column as indicated below: a Corpus Add lines 31, 4c, and 4e Substant line 5 5 Prior years' undistributed income. Subtract line 4 from line 2b. c Enter the amount of prior years' undistributed income. Subtract line 4 from line 2b. c Enter the amount of prior years' undistributed income for which a notice of deficiency has been assued, or on which the section 494(2a) tax has been previously assessed 3 Subtract line 6c from line 6b. Taxable amount - see instructions a Undistributed income for 2008. Subtract line 4 from line 2a. Taxable amount - see instructions a Undistributed income for 2008. Subtract line 4 from line 2a. Taxable amount income for 2008. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 17(0)(1)(1)(7) or 4942(3)(3) 8 Excess distributions carryover from 2004 not applied on line 5 or line 7 5 Excess distributions carryover to 2010 Subtract lines 7 and 8 from line 6a 2 Analysis of line 9 2 Excess from 2005 4 5 8, 9, 9, 71, 1 Excess from 2006 5 6 9, 5, 75, 71, 1	•				
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b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount elemaning amount distributed out of corpus 5 Excess distributions carryover applied to 2009 distributable amount (as indicated below: 5 Excess distributions carryover applied to 2009 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	` <u>`</u>			0.	
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Subtract lines 7 and 8 from line 6a 2,538,480. 0 Analysis of line 9 a Excess from 2005		2337203.		- 102-12-1-12-12-12-12-12-12-12-12-12-12-12-	
0 Analysis of line 9 a Excess from 2005 b Excess from 2006 c Excess from 2007 d Excess from 2008 569,571.	_	2.538.480.			
a Excess from 2005 380,451. b Excess from 2006 458,907. c Excess from 2007 592,027. d Excess from 2008 569,571.		2,330,400.		-	
b Excess from 2006		51.			
c Excess from 2007 592,027. d Excess from 2008 569,571.			İ		
d Excess from 2008 569,571.					
51 Application (1997) 1 1 1 1 1 1 1 1 1					

	TARD SEED F			61-13	90910 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	·A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	l it is a private operating			
foundation, and the ruling is effective fo	or 2009, enter the date of t	the ruling	▶ <u> </u>	-	
b Check box to indicate whether the found	dation is a private operatir	ng foundation described i	n section	4942(j)(3) or49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for			<u> </u>		
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year	•				
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)		- ·			
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from	İ				
an exempt organization				<u> </u>	
(4) Gross investment income	<u> </u>				
Part XV Supplementary Info			if the foundatior	n had \$5,000 or mo	re in assets
at any time during t	the year-see the i	nstructions.)		· · · · · · · · · · · · · · · · · · ·	
1 Information Regarding Foundation	•				
a List any managers of the foundation wh			ributions received by the	e foundation before the clos	e of any tax
year (but only if they have contributed n	nore man \$5,000)(See s	ection 507(0)(2).) -			
SEE STATEMENT 3					
b List any managers of the foundation when other entity) of which the foundation has			or an equally large porti	on of the ownership of a pa	rtnership or
	s a 1076 or greater interes	5t.			
NONE					
2 Information Regarding Contribut					
Check here X if the foundation of the foundation makes gifts, grants, etc.	only makes contributions to	to preselected charitable	organizations and does	not accept unsolicited requi	ests for funds. If
		· · · · · · · · · · · · · · · · · · ·		omplete liems za, u, c, anu	<u>. </u>
a The name, address, and telephone num	per of the person to whor	n applications should be	addressed:		
b The form in which applications should be	on cubmitted and informat	tion and materials they al	anuld include:	 	
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields.	kinds of institutions, or	other factors:	
			ŕ		
	- ·				

923611 02-02-10

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of recipient Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year BRIAN PARKS NONE N/A MINISTRY TO 124,000. COLLEGE STUDENTS ABROAD. DAVID LAWERENCE NONE N/A MINISTRY TO 28,500. COLLEGE STUDENTS ABROAD. JOSEPH MACK STILES NONE N/A 316,024. MINISTRY TO COLLEGE STUDENTS ABROAD. BRINTON HOWERTON NONE N/A 6,003. MINISTRY TO COLLEGE STUDENTS ABROAD. 474,527. ▶ 3a Total **b** Approved for future payment NONE Total 0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ided by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	7.111001K	code	Amount	Tanetion income
a	<u> </u>		ļ	<u></u>	
b	ļ		<u> </u>		
c			<u> </u>		
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	22.	
4 Dividends and interest from securities		···	 		
5 Net rental income or (loss) from real estate:			 		
a Debt-financed property					
b Not debt-financed property			 		
			-		
6 Net rental income or (loss) from personal					
property			-		
7 Other investment income			-		
8 Gain or (loss) from sales of assets other			ł		
than inventory					
9 Net income or (loss) from special events			<u> </u>		
10 Gross profit or (loss) from sales of inventory			<u> </u>		
11 Other revenue:					
a			ļ		
b			ļ		
c			Į.		
·					
d	1				
	1				
	1	0.		22.	0.
de	1	0.		22.	0.
e 2 Subtotal. Add columns (b), (d), and (e)	1	0.		22.	0.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)				13	0.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)				13	0.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the No Explain below how each activity for which incompared to the No Explain below how each activity for the No Explain below to the No Explain below to the No Explain below to the No Explain below to the No Explain below to the No Explain below to the No Explain belo	to the Acco	omplishment of Ex	cemp	t Purposes	22.
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9) THE MUSTARD SEED FOUNDATION 61-1390910 Page 13
Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the organization directly or indirectly engage in any of the following				Yes	No
	the Code (other than section 501(c)(3) organizations) or in section 5		ations?			
ä	Transfers from the reporting foundation to a noncharitable exempt of	rganization of:				
	(1) Cash			1a(1)		X
	(2) Other assets			1a(2)		<u>X</u>
t	Other transactions:					
	(1) Sales of assets to a noncharitable exempt organization			1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization			1b(2)		<u>X</u>
	(3) Rental of facilities, equipment, or other assets		-	1b(3)		X
	(4) Reimbursement arrangements			1b(4)		X
	(5) Loans or loan guarantees			1b(5)		X
	(6) Performance of services or membership or fundraising solicitation	ons		1b(6)		X
C	Sharing of facilities, equipment, mailing lists, other assets, or paid en	nployees		1c		X
C	I If the answer to any of the above is "Yes," complete the following sch	edule. Column (b) should alwa	ys show the fair market value of the goods	s, other ass	ets,	
	or services given by the reporting foundation. If the foundation received	ed less than fair market value	in any transaction or sharing arrangement	t, show in		
	column (d) the value of the goods, other assets, or services received					
1)	Line no (b) Amount involved (c) Name of noncharitable	e exempt organization	(d) Description of transfers transactions, ar	nd shanng arr	angeme	nts
	N/A					
						
_						
		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		
_	le the foundation directly or indirectly effiliated with or related to opposit	or mare toy avamat arganizat	l			
2 6	a Is the foundation directly or indirectly affiliated with, or related to, one	, ,	tions described		Γ Ψ	٦
	in section 501(c) of the Code (other than section 501(c)(3)) or in sec	31011 5277		Yes	LA	No
	o If "Yes," complete the following schedule. (a) Name of organization	(b) Type of organization	(c) Description of relation	nchin		
-	N/A	(b) Type of organization	(c) Description of relation	namp		
	N/A					
		 				
				-		
_	Under penalties of perjury, I declare that I have examined this return, including acc		As and to the best of my knowledge and belof it			
	and complete Design of preparer (other than taxpayer or fiduciary) is based on			is true, correc	.l,	
	- Dallah	15/12/10	Director			
,	Constitute of officer or trustee	1 - / 1 -		_		
5	Signature of officer or trustee	Daté *	Title Charlett	araria idani f		
	Preparer's	Dat	self-	arer's identify	ing nun	iber
5	Film's name (or yours DEAN DORTON FORD PS of self-employed) 106 W. VINE STREET,		11 2010 employed ► L			
	Firm's name (or yours DEAN DORTON FORD PS		EIN ►			
	106 W. VINE STREET,			=		
j	address and ZIP code LEXINGTON, KY 4050)7		9)255		
				Form 990	-PF/	2000

Schedule B

Department of the Treasury Internal Revenue Service

or 990-PF

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Name of the organization **Employer identification number** THE MUSTARD SEED FOUNDATION 61-1390910 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990 EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

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

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

Name of organization

Employer identification number

THE MUSTARD SEED FOUNDATION

61-1390910

525 A STR	(b) Name, address, and ZIP + 4 ILL BAPTIST CHURCH EET NE I, DC 20002 (b) Name, address, and ZIP + 4 INGS PRESBYTERIAN CHURCH	(c) Aggregate contributions - \$ 86,000. (c) Aggregate contributions	(d) Type of contribution Person X Payroll
1 CAPITOL H: 525 A STR: WASHINGTOI (a) No. 2 CEDAR SPR: 9132 KING:	Name, address, and ZIP + 4 ILL BAPTIST CHURCH EET NE N, DC 20002 (b) Name, address, and ZIP + 4 INGS PRESBYTERIAN CHURCH	Aggregate contributions - \$ 86,000.	Person X Payroll
525 A STREWASHINGTON (a) No. 2 CEDAR SPREWASHINGS	EET NE N, DC 20002 (b) Name, address, and ZIP + 4 INGS PRESBYTERIAN CHURCH	(c)	Payroll Noncash (Complete Part II if there is a noncash contribution) (d)
No. 2 CEDAR SPR. 9132 KINGS	Name, address, and ZIP + 4 INGS PRESBYTERIAN CHURCH		• •
9132 KING			l .
		s 67,400.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
OCHATLOS FOR PO BOX 91!	5048	\$15,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4 CLARA DUPI		s10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5 COLIN CHR	AGNOLIA	- \$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6 B. RAY THO 4624 CHAMI KNOXVILLE	BLISS AVENUE	- \$\$51,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

THE M	USTARD SEED FOUNDATION	61	-1390910
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	JAMES REED 3613 LITTLE ROAD LUTZ, FL 33548	\$17,500.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	THE CHAPEL AT SAWGRASS PO BOX 3205 PONTE VENDRA BEACH, FL 32004-3205	\$ 20,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	LEE & CARLA MARTIN 12334 OAKLAND HILLS POINT KNOXVILLE, TN 37934	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
10	NANCY WEAVER 2 SUNSET CIRCLE LITTLE ROCK, AR 72207	\$40,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
11	NEWMAN FAMILY FOUNDATION 24769 HARBOUR VIEW DRIVE PONTE VENDRA BEACH, FL 32082	\$6,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
12	SOUTHEAST CHRISTIAN CHURCH 920 BLANKENBAKER PARKWAY LOUISVILLE, KY 40243	\$12,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

THE MUSTARD SEED FOUNDATION

61-1390910

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	SOUTHWOOD PRESBYTERIAN CHURCH 1000 CARL T. JONES DRIVE HUNTSVILLE, AL 35802	\$ 5,400.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
14	SCOTT FOUNDATION 1594 RANIER FALLS DRIVE, NE ATLANTA, GA 30329	\$8,350.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
15	SUSAN DELAP 3401 SPRINGHILL DRIVE, SUITE 340 NORTH LITTLE ROCK, AR 72117	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
16	OPERATION MOBILIZATION PO BOX 444 TYRONE, GA 30290	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
17	THE CHURCH OF THE GOOD SHEPHERD 3741 GARRETT ROAD DURHAM, NC 27707	sss	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
18	THE MUSTARD SEED FOUNDATION PO BOX 88 WASHINGTON, VA 22747		Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
923452 02-0		Schedule R (Form	990 990-F7 or 990-PF) (2009)

Employer identification number

THE MUSTARD SEED FOUNDATION

61-1390910

Part I	Contributors (see instructions)					
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution			
<u>19</u>	THOMAS DUPREE 125 S MILL STREET LEXINGTON, KY 40507	\$10,000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution			
20	ACORN INVESTING, INC. 372 ROLLING WOOD LN, APT. C LAKE BARRINGTON, IL 60010	\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution			
		\$	Person Payroll Complete Part II if there is a noncash contribution)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution			
		\$	Person Payroll Onneash (Complete Part II if there is a noncash contribution)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution			
923452 02-0		\$Schodulo B // Form	Person Payroll Noncash (Complete Part II if there is a noncash contribution) 990, 990-EZ, or 990-PF) (2009)			

FORM 990-PF. INTEREST ON SAVI	NGS AND TEM	PORARY CASH 1	NVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
FIFTH THIRD BANK	22.			
TOTAL TO FORM 990-PF, PART I,	22.			
FORM 990-PF	RM 990-PF OTHER EXPENSES			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
ADMINISTRATIVE EXPENSE BANK FEES	2,904. 870.	726 . 435 .		2,178. 435.
IRELAND MISSION TRIP EXPENSES POSTAGE	18,715. 70.	0 . 0 .		18,715. 70.
TRAINING PROGRAM FOR MISSIONARY LEADERS	45,589.	0.	•	45,589.
TO FORM 990-PF, PG 1, LN 23	68,148.	1,161	•	66,987.
FORM 990-PF	PART XV - L OF FOUNDATI			STATEMENT 3

NAME OF MANAGER

JOHN S. SAWYER RICK IFLAND