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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

20**09**

Open to Public Inspection

> The organization may have to use a copy of this return to satisfy state reporting requirements For the 2009 calendar year, or tax year beginning January 1 , 2009, and ending December 31 D Employer identification number © Name of organization Worldwide Frontier Mission Crusade, Inc. Please B Check if applicable Doing Business As Mission Support 0199661 Address change tabet or print or Number and street (or P.O. box if mail is not delivered to street address) Room/suite Telephone number Name change . type See 2104 N. 187th Street (206) 948-6827 initial return Specific City or town, state or country, and ZIP + 4 ☐ Terminated Instruc-Shoreline, WA 98133 G Gross receipts \$ 23,691.95 Amended return F Name and address of principal officer Application pending H(a) Is this a group return for affiliates? Yes Moon-Hi Ree, 219 Martinvale Lane, San Jose, CA 951 H(b) Are all affiliates included? Tes If "No " attach a list (see instructions) Website: ▷ N/A H(c) Group exemption number > Form of organization Corporation Trust Association Other L Year of formation. 1988 M State of legal domicile CA Part Summary 1 Briefly describe the organization's mission or most significant activities: The vision to raise, train, and support native speaking missionries, WWFMC commits to recruit supporting members from local churches for both financial and prayer support. It wants to be the bridge between local churches and missionaries. Its goal is to spread the goapel to the unreached nationals throug evangelism, church planting, and biblical educaton. Check this box P if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a). 4 Number of independent voting members of the governing body (Part VI. line 1b) 5 Total number of employees (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, column (C), line 12. 7a b Net unrelated business taxable income from Form 990-T, line 34, 7h Prior Year **Current Year** 31,800 23,495 Contributions and grants (Part VII) ine Program service revenue (HartrVIII. Investment income (Part VIII) folumn (A), lines 3, 4, and 7d).

Other revenue (Part VIII, column (A)/Alines 5, 6d, 8c, 9c, 10c, and 11e)
Total revenue—add lines 8 through 11 (must equal that VIII, column (A), line 12) 2,106 197 10 12 33.906 23,692 Grants and similar amounts paid Part IX. column (A) times 1–3)
Benefits paid to or for members Part IX Column (A), line 4) 52.460 41,880 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,458 1,207 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). 54,918 43,082 Revenue less expenses. Subtract line 18 from line 12 (21,012)(19,390) Assets or Beginning of Current Year End of Year 20 Total assets (Part X, line 16) . 216,786 201,647 21 Total liabilities (Part X. line 26) Net assets or fund balances. Subtract line 21 from line 20 216,786 201,647 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sian Here Signature of office Moon-Hi Type or print name and title Date Check if Preparer's identifying number Preparer's (see instructions) signature employed ▶ □ Paid Preparer's Firm's name (or yours EIN **Use Only** if self-employed), address, and ZIP + 4 Phone no ▶ (Yes

May the IRS discuss this return with the preparer shown above? (see instructions)

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

Cat No 11282Y Form 99

Form **990** (2009)

DINZ OR NOT GENERAL

Par	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: WWFMC is to support the missionaries in foreign countries by sending them money for their living and mission activity expenses. the money has been raised from the interested indivisuals. Most of them offer their support on a monthly basis. Currently the missionaries in 10 foreign countries through the coordinators on a quarterly basis. Most of administrative expensis are paid out of volunteers pokets to maximize the contributors' donation.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes." describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 504cH3; and 504cH3 organizations and section 4947(a)(1) trusts are required to report the amount of grants and adocations to others, the total expenses, and revenue, if any, for each program service reported.
4.2	WWFMC's largest program is to support the natie language speaking missionaries in foreign counries to spread the Gospel of Jesus Christ to their own people and through them we want to build Christ centered evangelical churches modled after early churches in the Book of Acts of the Bible. In 2009, the fund was sent to the missionaries in Uganda, India, Tailand, Brazil, Russia, Mongolia, China, Kazakstan, Cambocia, and Ukraine.
4h	WWFMC continues recruitment effort in finding new supporting members in various communities. As a part of this effort, the improved version of brochures are made and distributed at the local churches and mission conferences, The chairperson also serves as a speaker as being invited by the local churches to introduce the organization's vision and mission.
4c	(Code:) (Expenses \$
	Other program services (Describe in Schedule O.) (Expenses 5 including grents of \$ \text{\text{\text{Poyenus 5}}} \text{\tex{\tex
40	Total program service expenses ▷ 43,082

Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	✓	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		✓
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10		✓
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11		✓
0	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	:		
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
0	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.			:
9	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		✓
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14a		14a		✓
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	16		✓_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		✓_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
20	If "Yes," complete Schedule G, Part III.	19		/
<u> 20</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	- 1	▼

Form	990 (2009)		Р	age 4
Par	t IV Checklist of Required Schedules (continued)			-
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
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		✓
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		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		✓
b	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		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
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		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		√
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		√
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		1
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		1
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		1
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		1
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		\
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		√

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.

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Lab D			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 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			i
	instructions)			,
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	_4a		✓
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.			
5a	Was the organization a party to a prohibited tax-shelter transaction at any time during the tax year?	5a		✓
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	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		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	-		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		\
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		✓
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		✓
9	Sponsoring organizations maintaining donor advised funds.			-
a h	Did the organization make any taxable distributions under section 4966?	9a 9b		<u> </u>
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person?	30		_
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	j		j
b ·	Gross income from other sources (Do not net amounts due or paid to other sources against			
40	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12a		

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

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			ļ
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			لـــــا
	any other officer, director, trustee, or key employee?	2		✓_
3	Did the organization delegate control over management duties customarily performed by or under the direct			_
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		✓_
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		\
6	Does the organization have members or stockholders?	6		✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		✓
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b		✓
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		✓
	tion B. Policies (This Section B requests information about policies not required by the Inte	ernal		
Rev	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			,
	form?	11		-
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		✓
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		<u> </u>
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		√
14	Does the organization have a written document retention and destruction policy?	14		✓
15.	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			اــــا
а	The organization's CEO, Executive Director, or top management official	15a		Ý
b	Other officers or key employees of the organization	15b		✓
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		✓
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			نـــــ
	the organization's exempt status with respect to such arrangements?	16b		L
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► California			- -
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(cr	c)(3)s	only)	
	available for public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	erest	
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds o	f the	
	organization: ► SungTack Kim, 2104 N. 187th Street, Shoreline, WA 98133			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)		ny current officer, direct				(D)	(E)	(F)	
Name and Title	Average	Positi	on (d	chec	k all	that ap	ply)	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Young Karl Choi Founder	2						,	0	0	0
SungTack Kim	 	-		\vdash	 	 	✓			<u> </u>
Chairperson	15	1						0	0	0
Moon-Hi Ree Treasurer	2			/				0	0	0
				ľ						
	-									

Par	t VII Section A. Officers, Directors, Tru	stees, Key	Emp	loy	ees,	an	d Hig	hest	Compensate	d Employees (c	ontinued)
	(A)	(B)			((C)			(D)	(E)	(F)
	Name and title	Average	Positi	on (d	checl	k all	that ap	ply)	Reportable	Reportable	Estimated
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
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	7 -4-1		L	1		<u>.</u>	<u> </u>	Ļ	0) 0
1b 2	Total	not limited	to th		liet	ed:	ahove) w/	·	l	
2	reportable compensation from the organiza			030	IIJI	cu .	above	, **	no received in	010 (11411 \$100,	500 III
						_					Yes No
3	Did the organization list any former office employee on line 1a? If "Yes," complete S							oye	e, or highest o	compensated	3
4	For any individual listed on line 1a, is the sthe organization and related organizations	sum of rep	ortab	le c	om	oen:	satior	an ' co	d other compe mplete Schedu	ensation from	
5	individual										4
	services rendered to the organization? If "	Yes," com	olete	Sch	nedu	ile .	J for s	such	person	· · · · ·	5 ✓
Sec	tion B. Independent Contractors	·									
1	Complete this table for your five highest compensation from the organization.	ompensate	ed inc	lepe	ende	ent	contra	acto	rs that receive	d more than \$	100,000 of
	(A) Name and business add	dress							(B) Description of s	services	(C) Compensation
N/A											
		<u> </u>		_				+-			
								+-	· · · · · ·		
								T			
2	Total number of independent contractors (imore than \$100,000 in compensation from						those	list	ed above) who	received	

Pari	t VII	Statement of Revenue			_		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a					
g g	b	Membership dues 1b					
fts,		Fundraising events 10					
. <u>g</u>		Related organizations 10					
ons sir		Government grants (contributions).	0				
	f	All other contributions, gifts, grants,	22 405				
흑	_ ا	and similar amounts not included above Noncash contributions included in lines 1a-1f: \$	23,495				
a So		Total. Add lines 1a–1f	·····	23,495		1	
			Business Code	20,100			
nue.	2a						
æ	ъ						
<u>i</u> 2	c						
Sen	d						
Ē	e						
Program Service Revenue	f	All other program service revenue .					
	g	Total. Add lines 2a–2f	▶	0			
	3	Investment income (including dividen	ds, interest, and	407			
		other similar amounts)		197			
	4 5	Income from investment of tax-exempt be	ond proceeds	0			
	٦	Royalties	(ii) Personal	0			
	6-	Gross Rents	(1) (1)				
		Less: rental expenses					
		Rental income or (loss)					İ
	d			0			
	7a	Gross amount from sales of (i) Securities	(ii) Other	1			
		assets other than inventory		i			
	b	Less: cost or other basis				1	
		and sales expenses .					
		Gain or (loss)				·	
_	a		•	0			
enne	8a	Gross income from fundraising					,
-		events (not including \$		1			
æ		of contributions reported on line 1c). See Part IV, line 18	<u> </u>			ł	
Other Re	h			İ			
8		Net income or (loss) from fundraising		0			
		Gross income from gaming activities.					
	-	See Part IV, line 19	a				
		Less: direct expenses	s				
	С	Net income or (loss) from gaming act	ivities ►	0			
	10a	Gross sales of inventory, less		-			
		returns and allowances	-			ŀ	
		Less: cost of goods sold I Net income or (loss) from sales of inver	tory •				
		Miscellaneous Revenue	Business Code				
	110		+				
						 	· · · · · · · · · · · · · · · · · · ·
	2						
	d	All other revenue		" ·	· · ·		
		Total. Add lines 11a–11d		0			
	12	Total revenue. See instructions.		23,692			<u> </u>

Part IX Statement of Functional Expenses

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

	All other organizations must complete coll	umn (A) but are not	t required to comp	olete columns (B),	(C), and (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	41,880	41,880		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes			 	
11	Fees for services (non-employees):				
а	Management	1,207		1,207	
	Legal				
	Accounting				
	Lobbying Professional fundraising services. See Part IV, line 17				
	-				
f	Investment management fees				
	Other				
12	Advertising and promotion				
13	Office expenses				· · · — · ·
14	Information technology				
15	Royalties				
16	Occupancy			<u> </u>	
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				<u> </u>
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
_	·				
a		···			
b					
C					· · · · · · · · · · · · · · · · · · ·
ď					
е					
	All other expenses	40.000	44 000	4 007	
<u>25</u>	Total functional expenses. Add lines 1 through 24f	43,082	41,880	1,207	
26	Joint costs. Check here ▶ ☐ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	N/A			

Part X **Balance Sheet** (B) End of year (A) Beginning of year 216,786 201,647 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 0 | Assets Notes and loans receivable, net o۱ Inventories for sale or use o i Prepaid expenses and deferred charges . . Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D Less: accumulated depreciation 10b 0 10c 0 11 Investments—publicly traded securities Investments—other securities. See Part IV, line 11 Investments—program-related. See Part IV, line 11 0 14 0 15 Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34) 201,647 216,786 Accounts payable and accrued expenses 0 20 Liabilities 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 Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . . . Other liabilities. Complete Part X of Schedule D 0 | Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ □ and or Fund Balances complete lines 27 through 29, and lines 33 and 34. 216,786 201,647 Temporarily restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. Net Assets Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund . . . Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances Total liabilities and net assets/fund balances

Pai	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other Other fthe 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		✓_
	Were the organization's financial statements audited by an independent accountant?	2b		\
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		.]	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			
	☐ 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		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

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

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

OMB No 1545-0047 Open to Public

Inspection Internal Revenue Service Name of the organization Employer identification number **WORLDWIDE FRONTIER MISSION CRUSADE. INC** 0199661 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) An organization that normally receives: (1) more than 33\% % 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 33/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **c** Type III–Functionally integrated **d** ☐ Type III–Other a ☐ Type I **b** Type II e By checking this box. I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). f If the organization received a written determination from the IRS that it is a Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the a following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (III) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? . . . (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . 11g(iii) Provide the following information about the supported organization(s). h (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of (i) Name of supported (ii) EIN in col. (i) listed in your the organization in organization in col (described on lines 1-9) organization above or IRC section governing document? col (i) of your (i) organized in the support? (see instructions)) Yes Yes Yes Nο No

Pal	(Complete only if you check					and 170(b)(1)(A)(VI)
	tion A. Public Support		#1.0000		(B 0000	4) 0000	10 T + 1
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	68,155	52,227	46,136	31,800	23,495	221,813
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	68,155	52,227	46,136	31,800	23,495	221,813
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						221,813
	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	68,155	52,227	46,136	31,800	23,495	221,813
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,352	6,856	9,354	2,106	197	21,865
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.)						000.040
11	Total support. Add lines 7 through 10 .			<u> </u>			222,010
12	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for organization, check this box and stop he	re	. <u></u>	d, third, fourth,			n 501(c)(3) ► □
Sec	tion C. Computation of Public Su						00.0
14	Public support percentage for 2009 (line		•	i, column (f))		14	99.9 <u>%</u> 91.8 %
15	Public support percentage from 2008 Sci					15	
16a	33% % support test—2009. If the organiand stop here. The organization qualifies	s as a publicly s	supported organ	nization			▶ ☑
b	33% % support test—2008. If the organization qua						check this
17a	10%-facts-and-circumstances test — 20 more, and if the organization meets the "facts-and-circum organization meets the "facts-and-circum"	acts-and-circun	nstances" test,	check this box	and stop here.	Explain in Part	IV how the
b 18	10%-facts-and-circumstances test—2008 more, and if the organization meets the "forganization meets the "facts-and-circumstances Private foundation. If the organization did	facts-and-circum ances" test. The	stances" test, o organization qua	theck this box a alifies as a public	ind stop here. ly supported org	Explain in Part ganization	IV how the ► □

	le A (Form 990 or 990-EZ) 2009						Page 3
Part	Support Schedule for Organ (Complete only if you checke				1)(2)		
Secti	on A. Public Support	d the box of	1 11116 3 01 Fa	.,,			
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					_	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities umished in any activity that is related to the organization's tax-exempt purpose						
	Gross receipts from activities that are not an inrelated trade or business under section 513						
	Tax revenues levied for the organization's penefit and either paid to or expended on ts behalf						
1	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3 received from disqualified persons .						-
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						ļ
	Public support (Subtract line 7c from					}	
	ine 6.)		<u> </u>		<u>.</u>		<u> </u>
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable 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 in line 10b, whether or not the business is regularly carried on	<u> </u>					
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)		<u> </u>				
14	First five years. If the Form 990 is for to organization, check this box and stop	here	<u> </u>	nd, third, fourtl	h, or fifth tax y	vear as a secti	on 501(c)(3) ▶ □
	ion C. Computation of Public Su	·	<u></u>			T-: 1	
16	Public support percentage for 2009 (lin Public support percentage from 2008 S	Schedule A, P	art III, line 15			15 16	% %
	ion D. Computation of Investmen					T 1	
	Investment income percentage for 2009 Investment income percentage from 20					17	<u>%</u> %
18	ini antonont incomo nercontoro from M	IN Schedule	A Part III line	17		1 10 1	/0

17 is not more than 33½ %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐ **5** 33½ % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33½ %, and line 18 is not more than 33½ %, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐

Schedule A (Form 990 or 990-EZ) 2009
Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.
Worldwide Frontier Mission Crusade, Inc. exists continuously to pursue its mission to support native language speaking
committed Christians to spread Good News of Jesus Christ. In order to maintatin this mission, WWFMC actively paticipate
in mission conferences to spread organization's mission and activities. Newsletters have been sent out regularly to the
regular contributors with full of spiritual messages, mission field news and activities with success stories as well as
prayer requests. It is good to know that this organization finds consistent financial suporters.
The year 2009 was very low in contributions and asset's interests. However, WWFMC keeps its hope to visit mission
fields by the officers/volunteers and to train and ncourage their important mission work. The observations of mission field
reality will be sent out to the supporters. The stories from the mission field are always refreshing to the supporters of
mission.
WWFMC made great efforts in recruting new supports during 2009 by visiting small churches that have dreams of mission
The small churches do not have financial capacity, and lack of manpower and knowledge to fully develop own mission
projects. For these churches, WWFMC becomes a bridge between these churches and foreign contries where mission
is crucial.
All these activities explanined above will continuously promotes WWFMC's mission and vision.