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Form 990

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)

OMB No 1545-0047

2009

Open to Public  
Inspection

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

## A For the 2009 calendar year, or tax year beginning and ending

|   |  |   |   |  |  |
|---|--|---|---|--|--|
| <input type="checkbox"/> Check if applicable<br><input type="checkbox"/> Address change<br><input checked="" type="checkbox"/> Name change<br><input type="checkbox"/> Initial return<br><input type="checkbox"/> Terminated<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Application pending | C Name of organization<br><b>LOVE IN THE NAME OF CHRIST<br/>OF THE TANANA VALLEY</b> |   | D Employer identification number<br><b>94-3047380</b> |  |  |
|   | Doing Business As  |   | E Telephone number<br><b>907-452-3876</b>             |  |  |
|   | Number and street (or P O box if mail is not delivered to street address)            |   | Room/suite  | G Gross receipts \$<br><b>383,718.</b>   |  |
|   | 818 26TH AVENUE  |   |   | H(a) Is this a group return<br>for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
|   | City or town, state or country, and ZIP + 4  |   |   | H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No                         |  |
|   | FAIRBANKS, AK 99701  |   |   | If "No," attach a list. (see instructions)   |  |
| F Name and address of principal officer: <b>BRADWICK JOHNSTON<br/>818 26TH AVENUE, FAIRBANKS, AK 99701</b>  |  | H(c) Group exemption number ►                                       |   |  |  |
| I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (3) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527  |  | J Website: ► N/A  |   |  |  |
| K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►   |  | L Year of formation <b>1985</b> M State of legal domicile <b>AK</b> |   |  |  |

## Part I Summary

|   |  |  |
|---|--|--|
| <b>Activities &amp; Governance</b><br><b>Revenue</b><br><b>Expenses</b><br><b>Net Assets or Fund Balances</b> | 1 Briefly describe the organization's mission or most significant activities: <b>MOBILIZE THE CHURCH TO TRANSFORM LIVES AND COMMUNITIES IN THE NAME OF CHRIST. LOCAL CHURCHES COME</b> |  |
|   | 2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.  |  |
|   | 3 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  |  |
|   | b Net unrelated business taxable income from Form 990-T, line 34   |  |
|   | 8 Contributions and grants (Part VIII, line 1h)  |  |
|   | 9 Program service revenue (Part VIII, line 2g)   |  |
|   | 10 Investment income (Part VIII, column (A), lines 3, 4 and 7d)  |  |
|   | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c and 11c)   |  |
| 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)                         |  |  |
| 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)   |  |  |
| 14 Benefits paid to or for members (Part IX, column (A), line 4)  |  |  |
| 15 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) ► <b>4,079.</b>                                   |  |  |
| 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)   |  |  |
| 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)                                  |  |  |
| 19 Revenue less expenses. Subtract line 18 from line 12   |  |  |
| 20 Total assets (Part X, line 16)   |  |  |
| 21 Total liabilities (Part X, line 26)  |  |  |
| 22 Net assets or fund balances. Subtract line 21 from line 20   |  |  |

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|     | Prior Year        | Current Year                     |
|-----|-------------------|----------------------------------|
| 8   |                   | <b>179,504.</b>                  |
| 9   |                   | <b>8,264.</b>                    |
| 10  |                   | <b>2,621.</b>                    |
| 11  |                   | <b>190,389.</b>                  |
| 13  |                   | <b>86,046.</b>                   |
| 14  |                   | <b>85,703.</b>                   |
| 15  |                   | <b>171,749.</b>                  |
| 16a |                   | <b>18,640.</b>                   |
| 17  |                   | <b>Beginning of Current Year</b> |
| 18  |                   | <b>End of Year</b>               |
| 19  | <b>1,595,451.</b> | <b>1,327,886.</b>                |
| 20  | <b>677,044.</b>   | <b>391,519.</b>                  |
| 21  | <b>918,407.</b>   | <b>936,367.</b>                  |

## Part II Signature Block

|   |  |            |   |  |
|---|--|------------|---|--|
| <b>Sign Here</b>                        | Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge |            |   |  |
|   | Signature of officer   |            | Date <b>5/26/10</b>                               |  |
|   | <b>BRADWICK JOHNSTON, TREASURER</b>  |            | Type or print name and title                      |  |
| <b>Paid<br/>Preparer's<br/>Use Only</b> | Preparer's signature ►   | Date       | Check if self-employed ► <input type="checkbox"/> | Preparer's identifying number (see instructions) |
|   | Firm's name (or yours if self-employed), address, and ZIP + 4 ►  | EIN ►      |   |  |
|   |  | Phone no ► |   |  |

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

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

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SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

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**Part III Statement of Program Service Accomplishments**

- 1 Briefly describe the organization's mission:  
**MOBILIZE THE CHURCH TO TRANSFORM LIVES AND COMMUNITIES IN THE NAME OF CHRIST. LOCAL CHURCHES COME TOGETHER AS A NETWORK. IT IS A COOPERATIVE PARTNERSHIP THAT ENABLES CHURCHES TO MAKE A LASTING IMPACT ON INDIVIDUALS, FAMILIES, AND CHILDREN IN NEED.**
- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No  
If "Yes," describe these new services on Schedule O.
- 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No  
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 501(c)(3) 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 expenses, and revenue, if any, for each program service reported.

**SEE SCHEDULE O FOR CONTINUATION(S)**

- 4a (Code: ) (Expenses \$ 79,988. Including grants of \$ ) (Revenue \$ )  
**CLEARINGHOUSE PROGRAM - THE CLEARINGHOUSE IS THE FOUNDATION OF LOVE INC. VOLUNTEERS IN THE CLEARINGHOUSE SCREEN REQUESTS FOR HELP FOR EXTENT OF NEED AND LEGITIMACY, AND REFERS THE REQUEST TO A LOCAL CHURCH MINISTRY, CHURCH VOLUNTEER, OR COMMUNITY AGENCY (TO AVOID SERVICE DUPLICATION). THROUGH CLEARINGHOUSE REFERRALS, CHURCH VOLUNTEERS ARE GIVEN OPPORTUNITIES TO MEET PRACTICAL NEEDS OF THE POOR AND NEEDY IN THE FAIRBANKS NORTH STAR BOROUGH WITHOUT REGARD TO RACE, CREED OR RELIGION. IN 2009, THE CLEARINGHOUSE RECEIVED OVER 1700 REQUESTS FOR HELP; 479 NEEDS WERE REFERRED TO AGENCIES AND 610 NEEDS REFERRED TO CHURCHES. CHURCH VOLUNTEERS DELIVER FOOD BOXES, SHOP AND CLEAN FOR SHUT-INS, PAY FOR EMERGENCY RENT, UTILITIES AND MEDICAL PRESCRIPTIONS, PROVIDE GRATIS COUNSELING SERVICES, MEDICAL AND DENTAL CARE AND MUCH**
- 4b (Code: ) (Expenses \$ 485. Including grants of \$ ) (Revenue \$ )  
**TRANSPORTAION PROGRAM - LOVE INC IS THE ONLY SOURCE OF FREE, DOOR-TO-DOOR RIDES IN FAIRBANKS. SINCE ITS INCEPTION IN 1992 THROUGH DECEMBER 2009, THE TRANSPORTATION PROGRAM HAS PROVIDED OVER 71,000 RIDES. 1,300 RIDES WERE PROVIDED IN 2009 THROUGH THIS PROGRAM. CLIENTS MUST BE FIRST REFERRED TO THE PROGRAM THROUGH THE CLEARINGHOUSE. LOVE INC COORDINATES THE RIDES SCHEDULE WITH VOLUNTEERS WHO HAVE SET ASIDE ONE DAY PER WEEK, EITHER A MORNING OR AFTERNOON, TO BE AVAILABLE TO GIVE RIDES. OTHER RIDES (NON-COUNTED) ARE PROVIDED FOR CLIENTS WHOSE NEEDS DIDNT FIT THE ELIGIBILITY CRITERIA FOR A PROGRAM REFERRAL, THROUGH CHURCH VOLUNTEERS (SUCH AS RIDES TO CHURCH, ETC.).**
- 4c (Code: ) (Expenses \$ 6,155. Including grants of \$ ) (Revenue \$ )  
**HOLIDAY PROGRAMS**
- THANKSGIVING FOOD BOX DELIVERIES AND MEALS - EACH YEAR, THE LOCAL FOOD BANK PREPARES HUNDREDS OF SPECIAL HOLIDAY FOOD BOXES WITH TURKEY AND ALL THE TRIMMINGS. EACH YEAR, LOVE INC PROVIDES DELIVERIES OF THOSE FOOD BOXES TO FAMILIES WHO LACK TRANSPORTATION AND MEANS TO PICK UP THEIR OWN FOOD. LOVE INC ALSO INTERVIEWS AND SELECTS UP TO THREE DOZEN SENIORS FOR HOME COOKED THANKSGIVING MEALS DELIVERED TO THEIR DOOR, WARM AND READY TO EAT! IN 2009, 26 SENIORS RECEIVED HOME COOKED MEALS AND TEN FAMILIES HAD FOOD BOXES DELIVERED.**
- THE CREATE-A-GIFT BAZAAR - SINCE 1991, THE CREATE-A-GIFT BAZAAR HAS**
- 4d Other program services. (Describe in Schedule O.)  
(Expenses \$ including grants of \$ ) (Revenue \$ )
- 4e Total program service expenses ► \$ 86,628.

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**Part IV Checklist of Required Schedules**

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  
*If "Yes," complete Schedule A*
- 2 Is the organization required to complete Schedule B, Schedule of Contributors?
- 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*
- 4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*
- 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*
- 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*
- 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*
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*
- 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 counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*
- 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*
- 11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable
- Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*
  - Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*
  - Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*
  - Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*
  - Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*
  - Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? *If "Yes," complete Schedule D, Part X*
- 12 Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII.*
- 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*
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
- 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*
- 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*
- 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*
- 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*
- 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*
- 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*
- 20 Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*

|     | Yes | No |
|-----|-----|----|
| 1   | X   |    |
| 2   | X   |    |
| 3   |     | X  |
| 4   |     | X  |
| 5   |     |    |
| 6   |     | X  |
| 7   |     | X  |
| 8   |     | X  |
| 9   |     | X  |
| 10  |     | X  |
| 11  | X   |    |
| 12  |     | X  |
| 13  | X   |    |
| 14a | X   |    |
| 14b |     | X  |
| 15  |     | X  |
| 16  |     | X  |
| 17  |     | X  |
| 18  |     | X  |
| 19  |     | X  |
| 20  |     | X  |

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**Part IV Checklist of Required Schedules (continued)**

|     |   | Yes | No |
|-----|---|-----|----|
| 21  | Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  | 21  | X  |
| 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  | X  |
| 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  | X  |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 | 24a | X  |
| 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 |    |
| d   | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?   | 24d |    |
| 25a | <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  | 25a | X  |
| b   | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I           | 25b | X  |
| 26  | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II  | 26  | X  |
| 27  | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III                | 27  | X  |
| 28  | Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  |     |    |
| a   | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV   | 28a | X  |
| b   | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  | 28b | X  |
| 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 | X  |
| 29  | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  | 29  | X  |
| 30  | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  | 30  | X  |
| 31  | Did the organization liquidate, terminate, or dissolve and cease operations?<br>If "Yes," complete Schedule N, Part I   | 31  | X  |
| 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  | X  |
| 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  | X  |
| 34  | Was the organization related to any tax-exempt or taxable entity?<br>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  | 34  | X  |
| 35  | Is any related organization a controlled entity within the meaning of section 512(b)(13)?<br>If "Yes," complete Schedule R, Part V, line 2  | 35  | X  |
| 36  | <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization?<br>If "Yes," complete Schedule R, Part V, line 2  | 36  | X  |
| 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  | X  |
| 38  | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?<br>Note. All Form 990 filers are required to complete Schedule O.   | 38  | X  |

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**Part 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   | 1a  | 0  |
| 1b  | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  | 1b  | 0  |
| 1c  | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?   | 1c  | X  |
| 2a  | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  | 2a  | 2  |
| b   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)  | 2b  | X  |
| 3a  | 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  |    |
| 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  | X  |
| 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  | X  |
| 5b  | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?   | 5b  | X  |
| 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?   | 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  | X  |
| b   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  | 6b  |    |
| 7   | <b>Organizations that may receive deductible contributions under section 170(c).</b>   | 7a  | X  |
| 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?  | 7b  |    |
| b   | If "Yes," did the organization notify the donor of the value of the goods or services provided?  | 7c  | X  |
| c   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?   | 7e  | X  |
| d   | If "Yes," indicate the number of Forms 8282 filed during the year  | 7f  | X  |
| e   | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  | 7g  | X  |
| f   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   | 7h  | X  |
| g   | For all contributions of qualified intellectual property, did the organization file Form 8899 as required?   | 8   |    |
| h   | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  | 9a  |    |
| 8   | <b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | 9b  |    |
| 9   | <b>Sponsoring organizations maintaining donor advised funds.</b>   |     |    |
| a   | Did the organization make any taxable distributions under section 4966?  |     |    |
| b   | Did the organization make a distribution to a donor, donor advisor, or related person?   |     |    |
| 10  | <b>Section 501(c)(7) organizations.</b> Enter:   | 10a |    |
| a   | Initiation fees and capital contributions included on Part VIII, line 12   | 10b |    |
| b   | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  |     |    |
| 11  | <b>Section 501(c)(12) organizations.</b> Enter:  | 11a |    |
| a   | Gross income from members or shareholders  | 11b |    |
| b   | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)   |     |    |
| 12a | <b>Section 4947(a)(1) non-exempt charitable trusts.</b> 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 |    |

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**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.

**Section A. Governing Body and Management**

- 1a Enter the number of voting members of the governing body 9  
 b Enter the number of voting members that are independent 9  
 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X  
 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? X  
 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? X  
 5 Did the organization become aware during the year of a material diversion of the organization's assets? X  
 6 Does the organization have members or stockholders? X  
 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? X  
 b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? X  
 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X  
 a The governing body? X  
 b Each committee with authority to act on behalf of the governing body? X  
 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 X

|    | Yes | No |
|----|-----|----|
| 1a | 9   |    |
| 1b | 9   |    |
| 2  |     | X  |
| 3  |     | X  |
| 4  | X   |    |
| 5  |     | X  |
| 6  |     | X  |
| 7a | X   |    |
| 7b |     | X  |
| 8a | X   |    |
| 8b |     | X  |
| 9  |     | X  |

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

- 10a Does the organization have local chapters, branches, or affiliates? X  
 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? X  
 11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? X  
 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990. X  
 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 X  
 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X  
 c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done X  
 13 Does the organization have a written whistleblower policy? X  
 14 Does the organization have a written document retention and destruction policy? X  
 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? X  
 a The organization's CEO, Executive Director, or top management official X  
 b Other officers or key employees of the organization X  
 If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) X  
 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? X  
 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 the organization's exempt status with respect to such arrangements? X

|     | Yes | No |
|-----|-----|----|
| 10a |     | X  |
| 10b |     |    |
| 11  | X   |    |
| 12a |     | X  |
| 12b |     |    |
| 12c |     |    |
| 13  |     | X  |
| 14  |     | X  |
| 15a | X   |    |
| 15b |     | X  |
| 16a |     | X  |
| 16b |     |    |

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed ► NONE  
 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available 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 interest 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 records of the organization: ► BRADWICK JOHNSTON - 907-452-6155  
818 26TH AVENUE, FAIRBANKS, AK 99701

Form 990 (2009)

932006  
02-04-10

## **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.

- year. See 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.

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

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

## LOVE IN THE NAME OF CHRIST OF THE TANANA VALLEY

## Form 990 (2009)

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**Part VII: Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

**Section B. Independent Contractors**

- 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

0888888 00 01 10

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Form 990 (2009)

# LOVE IN THE NAME OF CHRIST OF THE TANANA VALLEY

## Form 990 (2009)

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## **Part VIII Statement of Revenue**

| Part VIII 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  |                |                   |  |                                |   |
| 1 a Federated campaigns   | 1a             |                   |  |                                |   |
| b Membership dues   | 1b             |                   |  |                                |   |
| c Fundraising events  | 1c             | 4,375.            |  |                                |   |
| d Related organizations   | 1d             |                   |  |                                |   |
| e Government grants (contributions)   | 1e             |                   |  |                                |   |
| f All other contributions, gifts, grants, and similar amounts not included above  | 1f             | 175,129.          |  |                                |   |
| g Noncash contributions included in lines 1a-1f   |                | 4,538.            |  |                                |   |
| h Total. Add lines 1a-1f  |                | 179,504.          |  |                                |   |
| Program Service Revenue   | Business Code  |                   |  |                                |   |
| 2 a   |                |                   |  |                                |   |
| b   |                |                   |  |                                |   |
| c   |                |                   |  |                                |   |
| d   |                |                   |  |                                |   |
| e   |                |                   |  |                                |   |
| f All other program service revenue   |                |                   |  |                                |   |
| g Total. Add lines 2a-2f  |                |                   |  |                                |   |
| 3 Investment income (including dividends, interest, and other similar amounts)  |                | 262.              | 262.                                   |                                |   |
| 4 Income from investment of tax-exempt bond proceeds  |                |                   |  |                                |   |
| 5 Royalties   |                |                   |  |                                |   |
| 6 a Gross Rents   | (i) Real       | (ii) Personal     |  |                                |   |
| b Less: rental expenses   |                |                   |  |                                |   |
| c Rental income or (loss)   |                |                   |  |                                |   |
| d Net rental income or (loss)   |                |                   |  |                                |   |
| 7 a Gross amount from sales of assets other than inventory  | (i) Securities | (ii) Other        |  |                                |   |
| b Less: cost or other basis and sales expenses  |                | 200,972.          |  |                                |   |
| c Gain or (loss)  |                | 192,970.          |  |                                |   |
| d Net gain or (loss)  |                | 8,002.            |  |                                |   |
| 8 a Gross income from fundraising events (not including \$ 4,375. of contributions reported on line 1c). See Part IV, line 18 | a              | 2,980.            |  |                                |   |
| b Less: direct expenses   | b              | 359.              |  |                                |   |
| c Net income or (loss) from fundraising events  |                |                   | 2,621.                                 | 2,621.                         |   |
| 9 a Gross income from gaming activities. See Part IV, line 19   | a              |                   |  |                                |   |
| b Less: direct expenses   | b              |                   |  |                                |   |
| c Net income or (loss) from gaming activities   |                |                   |  |                                |   |
| 10 a Gross sales of inventory, less returns and allowances  | a              |                   |  |                                |   |
| b Less: cost of goods sold  | b              |                   |  |                                |   |
| c Net income or (loss) from sales of inventory  |                |                   |  |                                |   |
| Miscellaneous Revenue   | Business Code  |                   |  |                                |   |
| 11 a  |                |                   |  |                                |   |
| b   |                |                   |  |                                |   |
| c   |                |                   |  |                                |   |
| d All other revenue   |                |                   |  |                                |   |
| e Total. Add lines 11a-11d  |                |                   |  |                                |   |
| 12 Total revenue. See instructions  |                | 190,389.          | 10,885.                                | 0.                             | 0.  |

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Form 990 (2009)

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**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).

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.  | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>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  |                       |                                 |  |                             |
| 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  | 78,851.               | 41,333.                         | 35,378.                                | 2,140.                      |
| 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)   |                       |                                 |  |                             |
| 9 Other employee benefits   |                       |                                 |  |                             |
| 10 Payroll taxes  | 7,195.                | 3,918.                          | 3,082.                                 | 195.                        |
| 11 Fees for services (non-employees):   |                       |                                 |  |                             |
| a Management  |                       |                                 |  |                             |
| b Legal   |                       |                                 |  |                             |
| c Accounting  | 2,308.                |                                 | 2,308.                                 |                             |
| d Lobbying  |                       |                                 |  |                             |
| e Professional fundraising services See Part IV, line 17  |                       |                                 |  |                             |
| f Investment management fees  |                       |                                 |  |                             |
| g Other   |                       |                                 |  |                             |
| 12 Advertising and promotion  | 459.                  | 40.                             | 419.                                   |                             |
| 13 Office expenses  | 7,519.                | 1,657.                          | 5,682.                                 | 180.                        |
| 14 Information technology   | 1,004.                | 190.                            | 814.                                   |                             |
| 15 Royalties  |                       |                                 |  |                             |
| 16 Occupancy  | 15,337.               | 5,444.                          | 9,433.                                 | 460.                        |
| 17 Travel   | 2,861.                | 2,323.                          | 538.                                   |                             |
| 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   | 250.                  |                                 | 250.                                   |                             |
| 22 Depreciation, depletion, and amortization  | 28,081.               | 8,424.                          | 18,815.                                | 842.                        |
| 23 Insurance  | 4,767.                | 1,430.                          | 3,194.                                 | 143.                        |
| 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 CLEARINGHOUSE PROGRAM E   | 21,332.               | 21,332.                         |  |                             |
| b OTHER PROGRAM EXPENSES  | 1,642.                | 394.                            | 1,129.                                 | 119.                        |
| c TRAINING  | 143.                  | 143.                            |  |                             |
| d   |                       |                                 |  |                             |
| e   |                       |                                 |  |                             |
| f All other expenses  |                       |                                 |  |                             |
| 25 Total functional expenses. Add lines 1 through 24f   | 171,749.              | 86,628.                         | 81,042.                                | 4,079.                      |
| 26 Joint costs. Check here ► <input type="checkbox"/> if following<br>SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation |                       |                                 |  |                             |

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Form 990 (2009)

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**Part X Balance Sheet**

|                             |   | (A)<br>Beginning of year |                | (B)<br>End of year |
|-----------------------------|---|--------------------------|----------------|--------------------|
| Assets                      | 1 Cash - non-interest-bearing   | 12,414.                  | 1              | 5,032.             |
|                             | 2 Savings and temporary cash investments  | 207,126.                 | 2              | 152,652.           |
|                             | 3 Pledges and grants receivable, net  |                          | 3              |                    |
|                             | 4 Accounts receivable, net  |                          | 4              |                    |
|                             | 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L                   |                          | 5              |                    |
|                             | 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L      |                          | 6              |                    |
|                             | 7 Notes and loans receivable, net   |                          | 7              |                    |
|                             | 8 Inventories for sale or use   |                          | 8              |                    |
|                             | 9 Prepaid expenses and deferred charges   |                          | 9              |                    |
|                             | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D   | 1,234,291.               |                |                    |
|                             | b Less: accumulated depreciation  | 10b 64,089.              | 10c 1,375,911. | 1,170,202.         |
|                             | 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             |                    |
|                             | 15 Other assets. See Part IV, line 11   |                          | 15             |                    |
|                             | 16 Total assets. Add lines 1 through 15 (must equal line 34)  | 1,595,451.               | 16             | 1,327,886.         |
| Liabilities                 | 17 Accounts payable and accrued expenses  | 213,207.                 | 17             | 14,019.            |
|                             | 18 Grants payable   |                          | 18             |                    |
|                             | 19 Deferred revenue   |                          | 19             |                    |
|                             | 20 Tax-exempt bond liabilities  |                          | 20             |                    |
|                             | 21 Escrow or custodial account liability. Complete Part IV of Schedule D  |                          | 21             |                    |
|                             | 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L |                          | 22             |                    |
|                             | 23 Secured mortgages and notes payable to unrelated third parties   | 463,837.                 | 23             | 377,500.           |
|                             | 24 Unsecured notes and loans payable to unrelated third parties   |                          | 24             |                    |
|                             | 25 Other liabilities. Complete Part X of Schedule D   |                          | 25             |                    |
|                             | 26 Total liabilities. Add lines 17 through 25   | 677,044.                 | 26             | 391,519.           |
| Net Assets or Fund Balances | Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.                             |                          |                |                    |
|                             | 27 Unrestricted net assets  | 887,128.                 | 27             | 907,093.           |
|                             | 28 Temporarily restricted net assets  | 31,279.                  | 28             | 29,274.            |
|                             | 29 Permanently restricted net assets  |                          | 29             |                    |
|                             | Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.  |                          |                |                    |
|                             | 30 Capital stock or trust principal, or current funds   |                          | 30             |                    |
|                             | 31 Paid-in or capital surplus, or land, building, or equipment fund   |                          | 31             |                    |
|                             | 32 Retained earnings, endowment, accumulated income, or other funds   |                          | 32             |                    |
|                             | 33 Total net assets or fund balances  | 918,407.                 | 33             | 936,367.           |
|                             | 34 Total liabilities and net assets/fund balances   | 1,595,451.               | 34             | 1,327,886.         |

Form 990 (2009)

LOVE IN THE NAME OF CHRIST  
OF THE TANANA VALLEY

Form 990 (2009)

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**Part XI Financial Statements and Reporting**

- 1 Accounting method used to prepare the Form 990:  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?  
b Were the organization's financial statements audited by an independent accountant?  
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  
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?  
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.

|    | Yes | No |
|----|-----|----|
| 2a |     | X  |
| 2b |     | X  |
| 2c |     |    |
| 3a |     | X  |
| 3b |     |    |

Form 990 (2009)

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization **LOVE IN THE NAME OF CHRIST  
OF THE TANANA VALLEY** Employer identification number **94-3047380**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).  
 2  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)  
 3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).  
 4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: \_\_\_\_\_  
 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)  
 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  
 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)  
 8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)  
 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)  
 10  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  
 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.  
 a  Type I      b  Type II      c  Type III - Functionally integrated      d  Type III - Other  
 e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).  
 f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box   
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?  
 (ii) A family member of a person described in (i) above?  
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?  
 h Provide the following information about the supported organization(s).

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

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

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

Schedule A (Form 990 or 990-EZ) 2009

LOVE IN THE NAME OF CHRIST  
OF THE TANANA VALLEY

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Schedule A (Form 990 or 990-EZ) 2009

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

**Section A. Public Support**

| Calendar year (or fiscal year beginning in) ►   | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  | 679,110. | 693,778. | 433,768. | 182,764. | 179,504. | 2168924.  |
| 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  | 679,110. | 693,778. | 433,768. | 182,764. | 179,504. | 2168924.  |
| 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   |          |          |          |          |          | 2168924.  |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ►  | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 7 Amounts from line 4  | 679,110. | 693,778. | 433,768. | 182,764. | 179,504. | 2168924.  |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources |          | 226.     | 574.     | 553.     | 262.     | 1,615.    |
| 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.)                               |          |          |          | 2,015.   |          | 2,015.    |
| 11 Total support. Add lines 7 through 10   |          |          |          |          |          | 2172554.  |
| 12 Gross receipts from related activities, etc. (see instructions)   |          |          |          |          | 12       | 24,472.   |

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ►

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

|   |    |       |                                       |
|---|----|-------|---------------------------------------|
| 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))   | 14 | 99.83 | %                                     |
| 15 Public support percentage from 2008 Schedule A, Part II, line 14   | 15 | 99.85 | %                                     |
| 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization  |    |       | ► <input checked="" type="checkbox"/> |
| b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization   |    |       | ► <input type="checkbox"/>            |
| 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    |    |       | ► <input type="checkbox"/>            |
| b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization |    |       | ► <input type="checkbox"/>            |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions   |    |       | ► <input type="checkbox"/>            |

Schedule A (Form 990 or 990-EZ) 2009

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

| Calendar year (or fiscal year beginning in) ►  | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")   |          |          |          |          |          |           |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose |          |          |          |          |          |           |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513   |          |          |          |          |          |           |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  |          |          |          |          |          |           |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge  |          |          |          |          |          |           |
| <b>6 Total.</b> Add lines 1 through 5  |          |          |          |          |          |           |
| <b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons   |          |          |          |          |          |           |
| <b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year    |          |          |          |          |          |           |
| <b>c</b> Add lines 7a and 7b   |          |          |          |          |          |           |
| <b>8 Public support</b> (Subtract line 7c from line 6)   |          |          |          |          |          |           |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ►  | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) 2009 | (f) Total |
|--|----------|----------|----------|----------|----------|-----------|
| 9 Amounts from line 6  |          |          |          |          |          |           |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources   |          |          |          |          |          |           |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  |          |          |          |          |          |           |
| c Add lines 10a and 10b  |          |          |          |          |          |           |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on   |          |          |          |          |          |           |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)   |          |          |          |          |          |           |
| <b>13 Total support</b> (Add lines 9, 10c, 11, and 12)   |          |          |          |          |          |           |
| <b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/> |          |          |          |          |          |           |

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

|   |    |   |
|---|----|---|
| 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2008 Schedule A, Part III, line 15                      | 16 | % |

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

|  |    |   |
|--|----|---|
| 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2008 Schedule A, Part III, line 17                        | 18 | % |

**19a 33 1/3% support tests - 2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

**b 33 1/3% support tests - 2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

**Schedule D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization **LOVE IN THE NAME OF CHRIST  
OF THE TANANA VALLEY** Employer identification number **94-3047380**

**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)      |                         |                              |
| 4 Aggregate value at end of year           |                         |                              |

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  Yes  No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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?  Yes  No

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 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  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

2 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 Tax Year |
|----|---------------------------------|
| 2a |                                 |
| 2b |                                 |
| 2c |                                 |
| 2d |                                 |

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ► \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  Yes  No

9 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:

- (i) Revenues included in Form 990, Part VIII, line 1 ► \$ \_\_\_\_\_  
(ii) Assets included in Form 990, Part X ► \$ \_\_\_\_\_

2 If the organization received or held works of art, historical 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 ► \$ \_\_\_\_\_

LOVE IN THE NAME OF CHRIST  
OF THE TANANA VALLEY

Schedule D (Form 990) 2009

94-3047380 Page 2

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations

d  Loan or exchange programs

e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection?

Yes

No

**Part IV Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

Yes

No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21?

Yes

No

b If "Yes," explain the arrangement in Part XIV.

|    | Amount |
|----|--------|
| 1c |        |
| 1d |        |
| 1e |        |
| 1f |        |

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10

- 1a Beginning of year balance
- b Contributions
- c Net investment earnings, gains, and losses
- d Grants or scholarships
- e Other expenditures for facilities and programs
- f Administrative expenses
- g End of year balance

|    | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|----|------------------|----------------|--------------------|----------------------|---------------------|
| 1a |                  |                |                    |                      |                     |
| b  |                  |                |                    |                      |                     |
| c  |                  |                |                    |                      |                     |
| d  |                  |                |                    |                      |                     |
| e  |                  |                |                    |                      |                     |
| f  |                  |                |                    |                      |                     |
| g  |                  |                |                    |                      |                     |

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ► %
- b Permanent endowment ► %
- c Term endowment ► %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization

by:

- (i) unrelated organizations
- (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

| Yes    | No |
|--------|----|
| 3a(i)  |    |
| 3a(ii) |    |
| 3b     |    |

4 Describe in Part XIV the intended uses of the organization's endowment funds.

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

| Description of investment | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---------------------------|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land                   |                                      | 407,235.                        |                              | 407,235.       |
| b Buildings               |                                      | 790,671.                        | 30,411.                      | 760,260.       |
| c Leasehold improvements  |                                      |                                 |                              |                |
| d Equipment               |                                      | 36,385.                         | 33,678.                      | 2,707.         |
| e Other ..                |                                      |                                 |                              |                |

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

► 1,170,202.

Schedule D (Form 990) 2009

# LOVE IN THE NAME OF CHRIST OF THE TANANA VALLEY

**Schedule D (Form 990) 2009**

94-3047380 Page 3

**Part VII Investments - Other Securities.** See Form 990, Part X, line 12.

| (a) Description of security or category<br>(including name of security) | (b) Book value | (c) Method of valuation:<br>Cost or end-of-year market value |
|---|----------------|--|
| Financial derivatives   |                |  |
| Closely-held equity interests   |                |  |
| Other _____   |                |  |
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|   |                |  |
| <b>Total. (Col (b) must equal Form 990, Part X, col (B) line 12 ) ►</b> |                |  |

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

Total. (Col (b) must equal Form 990, Part X, col (B) line 13) ►

**Part IX Other Assets. See Form 990, Part X, line 15.**

**Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)**

**Part X** **Other Liabilities.** See Form 990, Part X, line 25.

**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 liability for uncertain tax positions under FIN 48.

932053  
02-01-10

LOVE IN THE NAME OF CHRIST  
OF THE TANANA VALLEY

Schedule D (Form 990) 2009

94-3047380 Page 4

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

|   |    |
|---|----|
| 1 Total revenue (Form 990, Part VIII, column (A), line 12)                                  | 1  |
| 2 Total expenses (Form 990, Part IX, column (A), line 25)                                   | 2  |
| 3 Excess or (deficit) for the year. Subtract line 2 from line 1                             | 3  |
| 4 Net unrealized gains (losses) on investments  | 4  |
| 5 Donated services and use of facilities  | 5  |
| 6 Investment expenses   | 6  |
| 7 Prior period adjustments  | 7  |
| 8 Other (Describe in Part XIV.)   | 8  |
| 9 Total adjustments (net). Add lines 4 through 8  | 9  |
| 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 | 10 |

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

|   |    |
|---|----|
| 1 Total revenue, gains, and other support per audited financial statements        | 1  |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:             |    |
| a Net unrealized gains on investments   | 2a |
| b Donated services and use of facilities  | 2b |
| c Recoveries of prior year grants   | 2c |
| d Other (Describe in Part XIV.)   | 2d |
| e Add lines 2a through 2d   | 2e |
| 3 Subtract line 2e from line 1  | 3  |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:            |    |
| a Investment 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 12.) | 5  |

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses 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:                |    |
| a Donated services and use of facilities   | 2a |
| b Prior year adjustments   | 2b |
| c Other losses   | 2c |
| d Other (Describe in Part XIV.)  | 2d |
| e Add lines 2a through 2d  | 2e |
| 3 Subtract line 2e from line 1   | 3  |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:               |    |
| a Investment 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 expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5  |

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

**SCHEDULE O**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

LOVE IN THE NAME OF CHRIST  
OF THE TANANA VALLEY

Employer identification number  
94-3047380

**FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:**

TOGETHER AS A NETWORK. IT IS A COOPERATIVE PARTNERSHIP THAT ENABLES  
CHURCHES TO MAKE A LASTING IMPACT ON INDIVIDUALS, FAMILIES, AND  
CHILDREN IN NEED.

**FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS**

MORE.

**FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS**

BEEN PROVIDING A MEANS FOR TEACHING CRAFTS TO PEOPLE FROM ALL PARTS OF  
THE COMMUNITY. LOW-INCOME FAMILIES ARE ABLE TO PROVIDE CHRISTMAS GIFTS  
TO THEIR FAMILIES FOR NO COST. IN 2009, 900 FREE TICKETS WERE  
DISTRIBUTED TO LOW-INCOME FAMILIES AND 118 CLIENTS ATTENDED THE EVENT.  
400 OTHER ATTENDEES PAID A NOMINAL \$5 ENTRANCE FEE. OVER 100  
VOLUNTEERS HELPED THE ATTENDEES MAKE QUALITY CRAFT ITEMS TO GIVE AS  
GIFTS FOR CHRISTMAS.

ADOPT-A-FAMILY - CHURCHES, CIVIC GROUPS, AND BUSINESSES "ADOPT"  
CAREFULLY CHOSEN FAMILIES NEEDING HELP AT CHRISTMAS. THE FAMILIES IN  
THIS PROGRAM ARE REFERRED INTO THE PROGRAM. THIS IS NOT ASSISTANCE THAT  
A CLIENT CAN REQUEST. REFERRALS ARE GATHERED FROM SCHOOL COUNSELORS,  
CHURCH PASTORS AND FROM THE LOVE INC CLEARINGHOUSE. THE CHOSEN  
FAMILIES ARE INTERVIEWED TO FIND OUT ABOUT THEIR NEEDS, THINGS THAT  
WOULD BENEFIT THE FAMILY SUCH AS GROCERIES, FUEL, CLOTHING, HOUSEHOLD  
NEEDS, ETC. AS WELL AS "FUN" IDEAS FOR THE KIDS. EACH GROUP, UPON  
BEING "MATCHED" WITH A FAMILY, ARE PROVIDED WITH THEIR CUSTOMIZED LIST

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

932211  
02-03-10

Schedule O (Form 990) 2009

**SCHEDULE O**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

|                          |  |  |
|--------------------------|--|--|
| Name of the organization | LOVE IN THE NAME OF CHRIST<br>OF THE TANANA VALLEY | Employer identification number<br>94-3047380 |
|--------------------------|--|--|

OF NEEDED ITEMS AND IDEAS ON THE MOST BENEFICIAL WAYS TO HELP TO EACH  
FAMILY. IN 2009, 67 FAMILIES EXPERIENCED A JOYOUS CHRISTMAS BECAUSE OF  
THIS PROGRAM.

FORM 990, PART VI, SECTION A, LINE 4: CHANGED OUR NAME FROM LOVE IN THE  
NAME OF CHRIST TO LOVE IN THE NAME OF CHRIST OF THE TANANA VALLEY.

CHANGED "THE CORPORATION IS ORGANIZED ON A MEMBERSHIP BASIS" TO "THE  
CORPORATION SHALL HAVE NO VOTING MEMBERS. THE MANAGEMENT AND AFFAIRS OF  
THE CORPORATION SHALL BE AT ALL TIMES UNDER THE DIRECTION OF THE BOARD OF  
DIRECTORS, WHOSE OPERATIONS IN GOVERNING THE CORPORATION SHALL BE DEFINED  
BY STATUTE AND BY THE CORPORATIONS BYLAWS. NO DIRECTOR SHALL HAVE ANY  
RIGHT, TITLE, OR INTEREST IN OR TO ANY PROPERTY OF THE CORPORATION".  
REMOVED FROM OUR BYLAWS THE REQUIREMENT TO NOTIFY NATIONAL LOVE IN THE NAME  
OF CHRIST OF CHANGES TO OUR BYLAWS.

FORM 990, PART VI, SECTION A, LINE 7A: PARTNER CHURCHES MEET ANNUALLY TO  
ELECT DIRECTORS TO THE BOARD. EACH PARTNER CHURCH HAS ONE VOTE IN THE  
ELECTION OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 8B: COMMITTEES ARE NOT AUTHORIZED TO  
ACT ON BEHALF OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11: COPIES OF THE COMPLETE RETURN ARE  
PROVIDED TO THE BOARD MEMBERS IN ADVANCE OF A REGULAR MEETING. AT THAT  
REGULAR MEETING THE RETURN IS REVIEWED IN DETAIL AND COMPARED TO FINANCIAL  
REPORTS AND INFORMATION FROM THE ORGANIZATIONS ACCOUNTING SYSTEM.

**SCHEDULE O**  
**(Form 990)**

## **Supplemental Information to Form 990**

Department of the Treasury  
Internal Revenue Service

**Name of the organization**

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

OMB No 1545-0047

2009

**Open to Public  
Inspection**

**Name of the organization**

LOVE IN THE NAME OF CHRIST  
OF THE TANANA VALLEY

**Employer identification number**  
**94-3047380**

FORM 990, PART VI, SECTION B, LINE 15A: BOARD OF DIRECTORS DETERMINES

SALARY OF EXECUTIVE DIRECTOR. ANY COST OF LIVING INCREASES ARE BASED ON

## AVAILABLE STATE OF ALASKA DATA.

FORM 990, PART VI, SECTION C, LINE 19: AVAILABLE ON REQUEST.

Form 4562

Depreciation and Amortization 990  
(Including Information on Listed Property)

OMB No 1545-0172

2009

Attachment  
Sequence No 67Department of the Treasury  
Internal Revenue Service (99)

Name(s) shown on return

LOVE IN THE NAME OF CHRIST  
OF THE TANANA VALLEY

Business or activity to which this form relates

Identifying number

FORM 990 PAGE 10

94-3047380

## Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

|  |   |          |
|--|---|----------|
| 1 Maximum amount. See the instructions for a higher limit for certain businesses   | 1 | 250,000. |
| 2 Total cost of section 179 property placed in service (see instructions)  | 2 |          |
| 3 Threshold cost of section 179 property before reduction in limitation  | 3 | 800,000. |
| 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-   | 4 |          |
| 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions | 5 |          |

| 6 | (a) Description of property | (b) Cost (business use only) | (c) Elected cost |  |
|---|-----------------------------|------------------------------|------------------|--|
|   |                             |                              |                  |  |
|   |                             |                              |                  |  |
|   |                             |                              |                  |  |
|   |                             |                              |                  |  |

|  |    |  |  |
|--|----|--|--|
| 7 Listed property. Enter the amount from line 29   | 7  |  |  |
| 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7             | 8  |  |  |
| 9 Tentative deduction. Enter the smaller of line 5 or line 8                                       | 9  |  |  |
| 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562                           | 10 |  |  |
| 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 | 11 |  |  |
| 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11           | 12 |  |  |
| 13 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12                     | 13 |  |  |

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

## Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.)

|   |    |         |
|---|----|---------|
| 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year | 14 | 1,500.  |
| 15 Property subject to section 168(f)(1) election   | 15 |         |
| 16 Other depreciation (including ACRS)  | 16 | 24,565. |

## Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

## Section A

|  |    |                          |
|--|----|--------------------------|
| 17 MACRS deductions for assets placed in service in tax years beginning before 2009  | 17 | 1,802.                   |
| 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here |    | <input type="checkbox"/> |

## Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only - see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|--------------------------------|--------------------------------------|--|---------------------|----------------|------------|----------------------------|
| 19a 3-year property            |                                      |  |                     |                |            |                            |
| b 5-year property              |                                      |  |                     |                |            |                            |
| c 7-year property              |                                      | 1,500.   | 7 YRS.              | HY             | 200DB      | 214.                       |
| d 10-year property             |                                      |  |                     |                |            |                            |
| e 15-year property             |                                      |  |                     |                |            |                            |
| f 20-year property             |                                      |  |                     |                |            |                            |
| g 25-year property             |                                      |  | 25 yrs.             |                | S/L        |                            |
| h Residential rental property  | /                                    |  | 27.5 yrs.           | MM             | S/L        |                            |
|                                | /                                    |  | 27.5 yrs.           | MM             | S/L        |                            |
| i Nonresidential real property | /                                    |  | 39 yrs.             | MM             | S/L        |                            |
|                                | /                                    |  |                     | MM             | S/L        |                            |

## Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

|                |   |  |         |    |     |  |
|----------------|---|--|---------|----|-----|--|
| 20a Class life |   |  |         |    | S/L |  |
| b 12-year      |   |  | 12 yrs. |    | S/L |  |
| c 40-year      | / |  | 40 yrs. | MM | S/L |  |

## Part IV Summary (See instructions.)

|   |    |         |
|---|----|---------|
| 21 Listed property. Enter amount from line 28   | 21 |         |
| 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr. | 22 | 28,081. |
| 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs  | 23 |         |

LOVE IN THE NAME OF CHRIST  
OF THE TANANA VALLEY

Form 4562 (2009)

94-3047380 Page 2

**Part V**

**Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles)**

**24a** Do you have evidence to support the business/investment use claimed?  Yes  No **24b** If "Yes," is the evidence written?  Yes  No

| (a)<br>Type of property<br>(list vehicles first) | (b)<br>Date<br>placed in<br>service | (c)<br>Business/<br>investment<br>use percentage | (d)<br>Cost or<br>other basis | (e)<br>Basis for depreciation<br>(business/investment<br>use only) | (f)<br>Recovery<br>period | (g)<br>Method/<br>Convention | (h)<br>Depreciation<br>deduction | (i)<br>Elected<br>section 179<br>cost |
|--|-------------------------------------|--|-------------------------------|--|---------------------------|------------------------------|----------------------------------|---------------------------------------|
| 25   |                                     |  |                               |  |                           |                              | 25                               |                                       |

**26** Property used more than 50% in a qualified business use:

|  |   |  |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|--|
|  | % |  |  |  |  |  |  |  |
|  | % |  |  |  |  |  |  |  |
|  | % |  |  |  |  |  |  |  |

**27** Property used 50% or less in a qualified business use:

|  |   |  |  |  |       |  |  |  |
|--|---|--|--|--|-------|--|--|--|
|  | % |  |  |  | S/L - |  |  |  |
|  | % |  |  |  | S/L - |  |  |  |
|  | % |  |  |  | S/L - |  |  |  |

**28** Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1

28

**29** Add amounts in column (i), line 26. Enter here and on line 7, page 1

29

**Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

| 30 | Total business/investment miles driven during the year (do not include commuting miles) | (a) Vehicle |    | (b) Vehicle |    | (c) Vehicle |    | (d) Vehicle |    | (e) Vehicle |    | (f) Vehicle |    |
|----|---|-------------|----|-------------|----|-------------|----|-------------|----|-------------|----|-------------|----|
|    |   | Yes         | No |
| 31 | Total commuting miles driven during the year  |             |    |             |    |             |    |             |    |             |    |             |    |
| 32 | Total other personal (noncommuting) miles driven  |             |    |             |    |             |    |             |    |             |    |             |    |
| 33 | Total miles driven during the year.<br>Add lines 30 through 32                          |             |    |             |    |             |    |             |    |             |    |             |    |
| 34 | Was the vehicle available for personal use during off-duty hours?                       |             |    |             |    |             |    |             |    |             |    |             |    |
| 35 | Was the vehicle used primarily by a more than 5% owner or related person?               |             |    |             |    |             |    |             |    |             |    |             |    |
| 36 | Is another vehicle available for personal use?  |             |    |             |    |             |    |             |    |             |    |             |    |

**Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

|    |  |  |     |    |
|----|--|--|-----|----|
| 37 | Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?  |  | Yes | No |
| 38 | Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners |  |     |    |
| 39 | Do you treat all use of vehicles by employees as personal use?   |  |     |    |
| 40 | Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?   |  |     |    |
| 41 | Do you meet the requirements concerning qualified automobile demonstration use?  |  |     |    |

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

**Part VI** Amortization

| (a)<br>Description of costs   | (b)<br>Date amortization begins | (c)<br>Amortizable amount | (d)<br>Code section | (e)<br>Amortization period or percentage | (f)<br>Amortization for this year |
|---|---------------------------------|---------------------------|---------------------|--|-----------------------------------|
| 42 Amortization of costs that begins during your 2009 tax year:               |                                 |                           |                     |  |                                   |
| 43 Amortization of costs that began before your 2009 tax year                 |                                 |                           |                     | 43                                       |                                   |
| 44 Total. Add amounts in column (f). See the instructions for where to report |                                 |                           |                     | 44                                       |                                   |

**State of Alaska  
Department of Commerce, Community, and  
Economic Development  
Division of Banking, Securities and Corporations**

**CERTIFICATE  
OF  
AMENDMENT  
Name Change**

THE UNDERSIGNED, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, hereby certifies that Articles of Amendment have been duly signed and verified pursuant to the provisions of Alaska Statutes, have been received in this office and have been found to conform to law.

ACCORDINGLY, the undersigned, as Commissioner of Community and Economic Development, and by virtue of the authority vested in me by law, hereby issues this Certificate of Amendment to

**Love In The Name Of Christ of the Tanana Valley  
Formerly,  
LOVE IN THE NAME OF CHRIST**

and attaches hereto the original copy of the Articles of Amendment.



IN TESTIMONY WHEREOF, I execute this certificate and affix the Great Seal of the State of Alaska on September 15, 2009

Emil Notti  
Commissioner



**Department of Commerce, Community, and Economic Development**  
**Corporations, Business and Professional Licensing**  
**CORPORATIONS SECTION**  
**PO Box 110808**  
**Juneau AK 99811-0808**

AK Entity #: 36935D  
Date Filed: 09/15/2009 08:00 AM  
State of Alaska  
Department of Commerce

RECEIVED  
DIVISION OF BUSINESS  
& PROFESSIONAL LICENSING  
JUNEAU, ALASKA

2009 SEP 15 AM 11:07

## ARTICLES OF AMENDMENT

Domestic Business, Professional Corporation or Non Profit Corporation

Pursuant to the provisions of Alaska Statutes, the undersigned corporation adopts the following Amended Articles of Incorporation:

1. Name the Corporation (as it is currently stated on the Certificate of Incorporation):

Alaska Entity #:

Love in the Name of Christ

36935D

2. Amended Name of Corporation (if changing the name of the corporation):

Love in the Name of Christ of the Tanana Valley

3. Business/Professional Corporations Only

If shares were issued:

If the class of shares are entitled to vote as a class:

|  |  |                                       |  |
|--|--|---------------------------------------|--|
| Date Amendment Adopted<br>By the Board of Directors and<br>Shareholders: |  | Number of Shares in Class:            |  |
| Number of Outstanding Shares:  |  | Class Series:                         |  |
| Number of Shares Entitled to<br>Vote:                                    |  | Number of Votes For Amendment:        |  |
| Number of Shares Voting For<br>Amendment:                                |  | Number of Votes Against<br>Amendment: |  |
| Number of Shares Voting Against<br>Amendment:                            |  |                                       |  |

If no shares were issued:

Date the amendment to the articles of incorporation was  
adopted by resolution of the Board of Directors:

4. Non-Profit Corporation Only

Date Amendment Adopted: August 25, 2009

Check one of the boxes below:

If adopted by the members of the corporation:

- There are members entitled to vote on the amendment; a quorum was present at the meeting and the amendment received at least two-thirds of the votes which members present at the meetings or represented by proxy were entitled to cast.
- The amendment was adopted by consent in writing signed by all members entitled to vote with respect to the amendment.

If adopted by the Board of Directors:

- There are no members and the amendment received the vote of a majority of the directors in office.
- There are no members entitled to vote and the amendment received the vote of a majority of the directors in office.



A corporation may not amend its articles of incorporation to change the names and addresses of the first directors, incorporators or the initial registered agent of the entity.

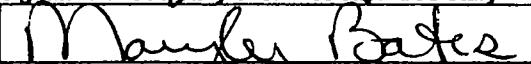
Each amended article must be written in its entirety.

**5. Amendments to the Articles of Incorporation are as follows:**

See attached pages (Articles I, II, III, VIII)

Attach an additional 8½" x 11" page for continuation of previous article and/or additional articles.  
Please indicate which article you are continuing.

The Amended Articles of Incorporation must be signed by the president or vice president and by its secretary or an assistant secretary of the entity.

| Signature of President or Vice President  | Printed Name of President or Vice President      | Date |
|---|--|------|
|  | Sandy Hampton                                    |      |
| Signature of Secretary or an Assistant Secretary                                    | Printed Name of Secretary or Assistant Secretary | Date |
|  | Marylee Bates                                    |      |

If you have specific legal questions or concerns about this filing, you are strongly advised to consult an attorney or other professional to assist you. Mail the Amended Articles of Incorporation and the \$25.00 filing fee to:

State of Alaska  
Corporations Section  
PO Box 110808  
Juneau AK 99801

For additional information or forms please visit our web site at: [www.corporations.alaska.gov](http://www.corporations.alaska.gov)

## **Amended Articles of Incorporation of Love In the Name of Christ of the Tanana Valley**

### **ARTICLE I**

**The name of the Corporation is Love In the Name of Christ of the Tanana Valley, hereinafter referred to as the "Corporation."**

### **ARTICLE II**

#### **A. The purposes for which the Corporation is organized are as follows:**

- 1. To operate and act exclusively for charitable, religious and educational purposes.**
  - 2. To organize and coordinate churches in the Fairbanks/North Star Borough community to respond to individual, family and project needs in the Name of Christ, incarnate Son of God, Savior, and Lord. The Corporation will accomplish the following objectives: fashion a cooperative helping relationship between area agencies and churches; generate untapped church resources to meet community needs, develop a clearinghouse to screen needs; use community resources, and, as it matures, other initiatives necessary to meet needs.**
  - 3. To receive and administer assets exclusively for charitable, religious and educational purposes.**
  - 4. To conduct any and all activities and exercise any and all such powers as are necessary to the achievement of the foregoing and in furtherance of the purposes of the Corporation.**
- B. Notwithstanding any other provision of these Articles, the Corporation shall not carry on any activity not permitted to be carried on (a) by an organization exempt from Federal income tax under Section 501 (c) (3) of the Internal Revenue Code of 1954, as amended (the "Code"), or corresponding provisions of any subsequent Federal tax laws or (b) by an organization, contributions to which are deductible under Section 701 © (2) of the Code, or corresponding provisions of any subsequent Federal tax laws.**
- C. No substantial part of the activities of the Corporation shall be to carry on propaganda or otherwise attempt to influence legislation.**
- D. The Corporation shall not participate in or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office.**

**ARTICLE III:**

- A. The Corporation is organized upon a nonstock basis.
- B. The Corporation shall have no voting members. The management and affairs of the Corporation shall be at all times under the direction of the Board of Directors, whose operations in governing the Corporation shall be defined by statute and by the Corporations bylaws. No Director shall have any right, title, or interest in or to any property of the Corporation.
- C. The assets which the corporation possesses are:  
Real property – Building located at 818 26<sup>th</sup> Ave, Fairbanks, Alaska.  
Personal property - Miscellaneous office equipment.
- D. All funds, whether income or principal, and whether acquired by gift or contribution or otherwise, shall be devoted to said purpose.
- E. No member, officer or director of this Corporation shall be personally liable for the debts or obligations of this Corporation of any nature whatsoever, nor shall any of the property of the members, officers or directors be subject to the payment of the debts or obligations of this Corporation.

**ARTICLE VIII**

These Articles of Incorporation may be amended in any manner consistent with applicable law, provided, however, that no amendment to the Articles of Incorporation shall be effective unless and until the same has been approved by Love In The Name of Christ (Love INC), National Headquarters, 430 Oak Grove Street, Suite 400, Minneapolis, MN 55403.

Application for Extension of Time To File an  
Exempt Organization Return

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box  X
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed).A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only 

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits.

|   |  |   |
|---|--|---|
| Type or print   | Name of Exempt Organization<br><b>LOVE IN THE NAME OF CHRIST<br/>OF THE TANANA VALLEY</b>                              | Employer identification number<br><b>94-3047380</b> |
| File by the due date for filing your return. See instructions | Number, street, and room or suite no. If a P.O. box, see instructions.<br><b>818 26TH AVENUE</b>                       |   |
|   | City, town or post office, state, and ZIP code. For a foreign address, see instructions.<br><b>FAIRBANKS, AK 99701</b> |   |

Check type of return to be filed (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

**BRADWICK JOHNSTON**

- The books are in the care of ► **818 26TH AVENUE - FAIRBANKS, AK 99701**

Telephone No. ► **907-452-6155** FAX No. ► 

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  . If this is for the whole group, check this box ►  . If it is for part of the group, check this box ►  and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2010**, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

►  calendar year **2009** or►  tax year beginning  , and ending 2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

|  |    |               |
|--|----|---------------|
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  | 3a | \$            |
| b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.   | 3b | \$            |
| Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c | \$ <b>N/A</b> |

3d If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.