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Part III

Statement of Program Service Accomplishments

1

Briefly describe the organization’s mission

THE BADDOUR CENTER IS DEDICATED TO PROVIDING A MODEL RESIDENTIAL COMMUNITY FOR ADULTS WITH MILD TO MODERATE INTELLECTUAL DISABILITIES IN AN ENVIRONMENT THAT PROMOTES MAXIMUM GROWTH INTELLECTUALLY, SPIRITUALLY, PHYSICALLY, SOCIALLY, EMOTIONALLY AND VOCATIONALLY

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

4a

(Code) (Expenses \$ 4,371,556 including grants of \$) (Revenue \$ 4,262,061)

OUR VISION THE BADDOUR CENTER IS COMMITTED TO GIVING MEN AND WOMEN THE OPPORTUNITY FOR LIVES OF DIGNITY, JOY AND HOPE THROUGH THE DEDICATION AND SUPPORT OF FAMILY AND FRIENDS, RESIDENTS CAN ACCOMPLISH GOALS, ENJOY LIFELONG FRIENDSHIPS AND REALIZE THEIR GREATEST POTENTIAL IN EVERY AREA OF LIFE PROGRAMS AND RESIDENTIAL SERVICES 1 A TOTAL OF 167 RESIDENTS REPRESENTING 24 STATES RECEIVED RESIDENTIAL SERVICES DURING 2009 THE CENTER WELCOMED ELEVEN NEW ADMISSIONS AND DISCHARGED SEVEN RESIDENTS, FINISHING THE YEAR WITH A TOTAL OF 161 RESIDENTS 2 PROGRAMS AND RESIDENTIAL SERVICES IS RESPONSIBLE FOR ENSURING THAT QUALITY PROGRAMS, SERVICES AND OPPORTUNITIES ARE OFFERED TO INDIVIDUALS WITH INTELLECTUAL DISABILITIES FOR THE PURPOSE OF PROMOTING MAXIMUM INDEPENDENCE IN THE LEAST RESTRICTIVE ENVIRONMENT POSSIBLE THE STAFF WORKS CLOSELY WITH THE RESIDENTS AND THEIR FAMILIES AS WELL AS THE OTHER PROGRAM DIVISIONS TO ENSURE THE MOST APPROPRIATE SUPPORTS AND SERVICES ARE IN PLACE TO ASSIST RESIDENTS IN MAINTAINING A WELL BALANCED AND HEALTHY LIFESTYLE 3 THE CENTER IS COMMITTED TO SUPPORTING THE RIGHTS OF INDIVIDUALS WITH INTELLECTUAL DISABILITIES AND EMPOWERS RESIDENTS TO MAKE DECISIONS AND CHOICES WHICH WILL LEAD TO PERSONAL SATISFACTION AND QUALITY OF LIFE 4 THE BADDOUR CENTER'S RESIDENTIAL COMMUNITY CONSISTS OF 14 GROUP HOMES AND 4 APARTMENT UNITS REGARDLESS OF THE LIVING ARRANGEMENT, MANY TEACHING OPPORTUNITIES ARE AVAILABLE TO ASSIST RESIDENTS IN ACHIEVING INDEPENDENT LIVING SKILLS 5 THE HEALTH AND PHYSICAL WELL-BEING OF EACH RESIDENT IS ASSESSED AND MAINTAINED THROUGH THE PROVISION OF SERVICES IN AN ON-SITE HEALTH CLINIC STAFFED BY TWO FULL-TIME REGISTERED NURSES, ONE FULL-TIME LPN, ONE PART-TIME RN, ONE PART-TIME LPN AND A PART TIME MEDICAL DIRECTOR 6 CASE MANAGEMENT IS PROVIDED FOR ALL RESIDENTS AND IS THE PROCESS USED TO TRACK INDIVIDUAL RESIDENT PROGRESS ACROSS ALL PROGRAM AREAS 7 A PERSON-CENTERED APPROACH TO PLANNING WITH EACH RESIDENT IS UTILIZED TO ENSURE INDIVIDUAL GOALS AND DREAMS FOR THE FUTURE ARE IDENTIFIED AND ADDRESSED 8 THE CENTER'S FIRST DIRECTOR OF EDUCATION AND RESEARCH WAS SELECTED IN 2004 THE EDUCATION AND RESEARCH DIVISION IS DESIGNED TO IMPROVE THE LIVES OF ADULTS WITH INTELLECTUAL DISABILITIES BY ADVANCING THE KNOWLEDGE AND UNDERSTANDING OF THEIR SPECIFIC CHARACTERISTICS AND NEEDS 9 EDUCATION AND RESEARCH PROGRAMS THIS PAST YEAR INCLUDED INDIVIDUAL AND GROUP COUNSELING TO ASSIST IDENTIFIED RESIDENTS WITH PERSONAL GROWTH AND EDUCATIONAL CLASSES AND INDIVIDUALIZED PROGRAMMING OFFERED TO ENHANCE THE SOCIAL AND BEHAVIORAL SKILLS OF RESIDENTS FURTHER, CONTINUING EDUCATION OPPORTUNITIES WERE PROVIDED TO STAFF MEMBERS TO ENHANCE JOB SPECIFIC SKILLS AS IT RELATES TO SERVING OUR RESIDENTS AND UNIVERSITY STUDENT PRACTITUM EXPERIENCES WERE OFFERED TO ENCOURAGE EMERGING PROFESSIONALS TO SPECIALIZE IN WORKING WITH OUR POPULATION

4b

(Code) (Expenses \$ 1,958,941 including grants of \$) (Revenue \$ 1,592,333)

VOCATIONAL SERVICES1 THE VOCATIONAL SERVICES DIVISION PROVIDES 156 RESIDENTS AND 10 DAY CLIENTS WORK OPPORTUNITIES IN HAND-PACKAGING, DISPLAY ASSEMBLY, CUSTOM FULFILLMENT, GREENHOUSE/NURSERY WORK, GROUNDS MAINTENANCE, AND GARDEN CENTER RETAIL/CUSTOMER SERVICE THROUGH THESE JOBS, THE RESIDENTS GAIN BOTH SKILLS AND CONFIDENCE AND EARN A PAYCHECK 2 THE VOCATIONAL DIVISION RECEIVED "SUPPLIER EXCELLENCE" AWARDS IN 2001, 2003 AND 2004 FROM ITS LARGEST CUSTOMER, WHICH IS THE HIGHEST LEVEL OF ACHIEVEMENT THE DIVISION HAS CONSISTENTLY ACHIEVED PLATINUM LEVEL SCORECARDS DURING THE 20 YEAR PARTNERSHIP WITH THIS CUSTOMER 3 EACH RESIDENT RECEIVES THE INDIVIDUALIZED RESOURCES AND TRAINING NECESSARY TO LEARN NEW JOB SKILLS, DEVELOP JOB KEEPING SKILLS, MEET CHALLENGES AND BE PRODUCTIVE 4 THE VOCATIONAL DIVISION OFFERS HORTICULTURAL THERAPY TO RESIDENTS WHO WISH TO PARTICIPATE IN THIS PROGRAM, GARDENING SERVES AS A MEDIUM THROUGH WHICH RESIDENTS LEARN LIFE SKILLS SUCH AS NURTURING, NATURAL CONSEQUENCES, AND TEAM WORK THE PROGRAM IS PROVIDED THROUGH ALTERNATIVE VOCATIONAL SERVICES (AVS) 5 THE VOCATIONAL DIVISION OFFERS BOTH THE NEWEST AND YOUNGEST RESIDENTS JOB TRAINING THROUGH THE SHAPE PROGRAM SHAPE IS PROVIDED THROUGH AVS IN A THERAPEUTIC ENVIRONMENT THAT FOCUSES PRIMARILY ON DEVELOPMENT OF WORK SKILLS AND BEHAVIORS 6 REACH IS ANOTHER AVS PROGRAM DESIGNED FOR SENIORS WHO ARE NEITHER READY NOR WILLING TO CEASE EMPLOYMENT REACH FOCUSES ON SKILL MAINTENANCE IN A SLOWER PACED ENVIRONMENT 7 VOCARE PROVIDES SKILLS ASSESSMENT, CAREER INTEREST INVENTORIES, AND JOB EXPLORATION TO RESIDENTS ALREADY ACTIVELY ENGAGED IN THE WORK PROGRAM VOCARE STRATEGIES ARE PERSON-CENTERED AND INCLUDE SPECIALIZED TESTING, SITUATIONAL ASSESSMENTS, JOB TRY OUTS, ON-THE-JOB TRAINING, WORK ADJUSTMENT SESSIONS, AND ONE-ON-ONE CAREER COUNSELING 8 THE VOCATIONAL DIVISION WORKS CLOSELY WITH THE CENTER'S OTHER DIVISIONS TO ENSURE RESIDENTS' WORK EXPERIENCES BALANCE WITH OTHER CENTER OFFERINGS LAST YEAR RESIDENTS WORKED 280 DAYS AT AN AVERAGE OF 3 39 HOURS PER DAY

4c

(Code) (Expenses \$ 722,794 including grants of \$) (Revenue \$ 51,052)

COMMUNITY LIFE1 THE COMMUNITY LIFE DIVISION PLAYS A KEY ROLE IN RESIDENTS' LIVES AND IS MADE OF FIVE MAJOR DEPARTMENTS FROM WHICH RESIDENTS HAVE OPPORTUNITIES FOR GROWTH SINCE THE BADDOUR CENTER WAS FOUNDED ON CHRISTIAN PRINCIPLES AND CONTINUES TO BE AFFILIATED WITH THE UNITED METHODIST CHURCH, A PART-TIME CHAPLAIN IS EMPLOYED TO IMPLEMENT AND COORDINATE OPPORTUNITIES FOR WORSHIP AND STUDY THIS YEAR, 144 RESIDENTS PARTICIPATED IN SPIRITUAL GROWTH PROGRAMS, CHAPEL AND OTHER ACTIVITIES IN THE SPIRITUAL GROWTH DEPARTMENT A WEEKLY PRAYER LIST IS ALSO PUBLISHED 2 THE PHYSICAL FITNESS DEPARTMENT CREATES A PERSONAL EXERCISE PROGRAM FOR EACH RESIDENT, INCLUDING CARDIOVASCULAR AND STRENGTH-BUILDING EXERCISES THIS DEPARTMENT ALSO OFFERS INTRAMURAL AND SPECIAL OLYMPICS SPORTS ALTHOUGH THIS IS A RECOMMENDED PROGRAM, RESIDENTS ENJOY IT BECAUSE OVER 170 RESIDENTS PARTICIPATED IN FITNESS AND SPECIAL OLYMPICS THIS YEAR, WORKING-OUT 240 DAYS OUT OF 365 3 THE RECREATION DEPARTMENT PROVIDES RESIDENTS OPPORTUNITIES TO PARTICIPATE INA VARIETY OF ON- AND OFF-CAMPUS LEISURE ACTIVITIES THE GOALS OF THIS PROGRAM ARE TO HELP THE RESIDENTS DEVELOP APPROPRIATE SOCIAL SKILLS AND TO PROVIDE ACTIVITIES THAT ARE FUN AND ENTERTAINING WE SERVED 173 RESIDENTS LAST FISCAL YEAR 4 RANGING FROM ONE TO AS MANY AS 172 TIMES FOR CLASSES, 156 RESIDENTS PARTICIPATED IN SOME TYPE OF EXPRESSIVE ARTS PROGRAM THE EXPRESSIVE ARTS DEPARTMENT OFFERS CLASSES IN ART, MUSIC, MIME, PUPPETRY, DRAMA, LITERATURE, VOICE AND A VARIETY OF OTHER ART VENUES EXPRESSIVE ARTS CLASSES WERE WELL ATTENDED LAST YEAR - OVER 30 DIFFERENT CLASSES AND INDIVIDUAL MUSIC 2009 HELD THE SECOND ANNUAL CHRISTMAS PAGEANT AT THE FINES ART AUDITORIUM AT NORTHWEST COMMUNITY COLLEGE IN SENATOBIA - 63 RESIDENTS SHOWCASED AND PERFORMED BEFORE A PACKED HOUSE 5 THE MIRACLES AND MIRACLES ENCORE, THE BADDOUR CENTER'S NATIONALLY RECOGNIZED RESIDENT CHOIR AND SMALL GROUP ENSEMBLE, MAKES UP THE FINAL AREA OF COMMUNITY LIFE THEIR MINISTRY IS TO GLORIFY GOD, DEMONSTRATE THE ABILITIES OF PERSONS WITH INTELLECTUAL DISABILITIES AND TELL THE STORY OF THE BADDOUR CENTER RESIDENTS AUDITION TO BE ONE OF THE 25 MEMBERS WHO ATTEND MANDATORY PRACTICES WEEKLY * CLOSE TO 10,000 MILES * OVER 50 CONCERT VENUES * PERFORMED FOR CLOSE TO 7,000 PEOPLE INTRODUCING POTENTIAL RESIDENTS AND DONORS TO THE BADDOUR CENTER

4d

Other program services (Describe in Schedule O)














(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses➤\$ 7,053,291

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
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 	9	Yes
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	Yes
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. 	11	Yes
	• 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 	12	Yes
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 	12A	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	No
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 U S ? If "Yes," complete Schedule F, Part II	15	No
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 U S ? If "Yes," complete Schedule F, Part III	16	No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18	Yes
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 	19	No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	No

Part IV

Checklist of Required Schedules (continued)

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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
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? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
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 owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a25	1c	Yes
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?				
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a362	2b	Yes
	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)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		No
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		No
	b If "Yes," enter the name of the foreign country: <input type="text"/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
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		No
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		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		No
7 Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d0		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .	7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . .	7g		No
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		No
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8	No
9 Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?	9a		No
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
10 Section 501(c)(7) organizations. Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter				
a	Gross income from members or shareholders	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a	No
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		

Part VI

Governance, Management, and Disclosure

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body	1a	31	
b	Enter the number of voting members that are independent	1b	30	
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?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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	9		No

Section B. Policies

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		No
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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?	16b		No

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶TN , MS , FL
18	Section 6104 requires an organization to make its Form 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. <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> 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. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ JERRY HARMON BOX 97 SENATO BIA, MS 38668 (662) 562-0100

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

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

Form **990** (2009)

1b	Total	213,193	20,886
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2

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization

1

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

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		
	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization		
	0		

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	1a	Federated campaigns . . .	1a17,925	1,708,467			
	b	Membership dues	1b				
	c	Fundraising events	1c84,153				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f1,606,389				
	g	Noncash contributions included in lines 1a-1f \$ 352,333					
	h	Total. Add lines 1a-1f					
Program Service Revenue			Business Code	4,183,042	4,183,042		
	2a	Fees/Charges(Tuition)					
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		254,832			254,832
	4	Income from investment of tax-exempt bond proceeds . .		0			
	5	Royalties		0			
	6a	(i) Real		0			
		(ii) Personal					
	b	Gross Rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)		0			
	7a	(i) Securities		-43,292			
		(ii) Other					
	b	Gross amount from sales of assets other than inventory	807,300				
	b	Less cost or other basis and sales expenses	850,592				
	c	Gain or (loss)	-43,292				
	d	Net gain or (loss)		-43,292			-43,292
	8a	Gross income from fundraising events (not including \$ 51,699 of contributions reported on line 1c) See Part IV, line 18		84,153	0		
a		84,153					
b		Less direct expenses	51,699				
c	Net income or (loss) from fundraising events . .		0				
9a	Gross income from gaming activities See Part IV, line 19			0			
	a						
	b	Less direct expenses					
c	Net income or (loss) from gaming activities . .		0				
10a	Gross sales of inventory, less returns and allowances . .		1,959,787	1,592,333	1,592,333		
	a	1,959,787					
	b	Less cost of goods sold . . .					367,454
c	Net income or (loss) from sales of inventory . .		1,592,333				
Miscellaneous Revenue			Business Code	35,955	35,955		
11a	CHOIR PERFORMANCES						
b	CAMPUS VENDING						
c	ALL OTHER						
d	All other revenue						
e	Total. Add lines 11a-11d		130,071				
12	Total revenue. See Instructions		7,825,453	5,905,446		211,540	

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) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U S See Part IV, line 22	300,232	300,232		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	218,170	87,268	88,827	42,075
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	4,290,986	4,015,102	211,587	64,297
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0			
9	Other employee benefits	607,514	416,803	71,632	119,079
10	Payroll taxes	326,285	297,350	21,369	7,566
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	4,082		4,082	
c	Accounting	12,960		12,960	
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	9,102		9,102	
g	Other	227,918	55,606	163,917	8,395
12	Advertising and promotion	3,104	2,104	1,000	
13	Office expenses	280,272	175,311	49,932	55,029
14	Information technology	40,437	16,740	19,720	3,977
15	Royalties	0			
16	Occupancy	807,529	791,784	12,322	3,423
17	Travel	44,711	26,044	9,148	9,519
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	11,625	3,582	6,815	1,228
20	Interest	691			691
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	587,343	476,916	103,439	6,988
23	Insurance	300,328	287,723	12,493	112
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	SHOP PARTS & EXPENSES	38,397	38,261	91	45
b	FUND RAISING EXPENSES	22,131			22,131
c	FUEL & OIL	54,880	52,960	1,451	469
d	ENTERTAIN/PUBLIC RELATIONS	39,746	2,214	36,405	1,127
e	BAD DEBT EXPENSE	16,786		16,786	
f	All other expenses	31,050	7,291	22,845	914
25	Total functional expenses. Add lines 1 through 24f	8,276,279	7,053,291	875,923	347,065
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				1	0
	2	Savings and temporary cash investments			203,406	2	227,245
	3	Pledges and grants receivable, net			37,102	3	3,113
	4	Accounts receivable, net			198,177	4	538,721
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			20,000	5	0
	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	0
	7	Notes and loans receivable, net				7	0
	8	Inventories for sale or use			212,295	8	212,528
	9	Prepaid expenses and deferred charges			123,391	9	59,922
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	17,473,013			
	b	Less accumulated depreciation	10b	9,939,993	7,759,436	10c	7,533,020
	11	Investments—publicly traded securities			6,646,799	11	8,386,083
	12	Investments—other securities. See Part IV, line 11				12	0
	13	Investments—program-related. See Part IV, line 11				13	0
	14	Intangible assets				14	0
	15	Other assets. See Part IV, line 11				15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)			15,200,606	16	16,960,632
Liabilities	17	Accounts payable and accrued expenses			557,185	17	1,006,572
	18	Grants payable				18	
	19	Deferred revenue			352,295	19	323,933
	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				23	
	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			909,480	26	1,330,505
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			11,263,581	27	12,022,842
	28	Temporarily restricted net assets			336,827	28	915,067
	29	Permanently restricted net assets			2,690,718	29	2,692,218
	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			14,291,126	33	15,630,127
	34	Total liabilities and net assets/fund balances			15,200,606	34	16,960,632

Part XI **Financial Statements and Reporting**

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? . . .		No
b Were the organization's financial statements audited by an independent accountant?	Yes	
c If "Yes," to 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	Yes	
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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated 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?		No
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 . . .		No

SCHEDULE A

(Form 990 or 990EZ)

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 BADDOUR CENTER INC	Employer identification number 64-0578661
--	--

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 **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 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	
Total									

Part II

Support Schedule for Organizations Described in IRC 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.")	1,310,031	1,247,452	1,640,423	1,905,768	1,708,467	7,812,141
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	1,310,031	1,247,452	1,640,423	1,905,768	1,708,467	7,812,141
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)						2,636,297
6 Public Support. Subtract line 5 from line 4						5,175,844

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	1,310,031	477,376	1,640,423	1,905,768	1,708,467	7,812,141
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	448,160	477,376	744,138	408,032	254,832	2,332,538
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	78,622	108,444	112,161	103,754	130,071	533,052
11 Total support (Add lines 7 through 10)						10,677,731

12 Gross receipts from related activities, etc (See instructions)	12	31,013,611
--	----	------------

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 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	48 470 %
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	57 070 %

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

☒

b 33 1/3% support test—2008. If the organization did not check the 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

☒

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

☒

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

☒

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

☒

Part IIISupport Schedule for Organizations Described in IRC 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
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total. Add lines 1 through 5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts 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						
cAdd lines 7a and 7b						
8Public Support (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
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13Total support (Add lines 9, 10c, 11 and 12.)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a33 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		
b33 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		
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

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

Explanation
OTHER INCOME CONSISTS OF CAMPUS VENDING MACHINES REVENUE, SALE OF HOLIDAY CARDS, COOKBOOKS AND RECORDINGS OF THE MIRACLES, PERFORMACES BY THE CENTER'S TRAVELING CHOIR, THE MIRACLES, AND VARIOUS RELATED ACTIVITIES

Additional Data

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Wayne Godwin Trustee	2 00	X						0	0	0
Steve Nelson Trustee	3 00	X						0	0	0
Stan McNeese Trustee	2 50	X						0	0	0
Shea Baddour Veazey Trustee	30	X						0	0	0
Sharon Perry Trustee	2 40	X						0	0	0
Rev Steve Casteel Trustee		X						0	0	0
Rev Jim Omon Trustee	30	X						0	0	0
Rev Jeff Switzer Trustee	30	X						0	0	0
Rev Vickie Sizemore-Baldwin Trustee		X						0	0	0
Polly Bailey Trustee	1 10	X						0	0	0
Paul Baddour Jr Trustee	60	X						0	0	0
Paul Baddour Trustee	2 00	X						0	0	0
Parke Pepper ExecDir/Trustee	50 00	X		X				131,970	0	11,673
Mike Landrum Chairman	4 20	X		X				0	0	0
Mark Medford Trustee	30	X						0	0	0
Margy Graham Trustee	30	X						0	0	0
Lisa Fuller Trustee	60	X						0	0	0
Kristen Baddour Montgomery Trustee	30	X						0	0	0
Judy Starkey Secretary	3 00	X		X				0	0	0
Jerry Harmon CFO	50 00			X				81,223	0	9,213
Jackie Pennington Trustee	30	X						0	0	0
Herbert Woodrick Trustee		X						0	0	0
Gladys Hamilton Trustee	1 10	X						0	0	0
Gerry Thomas Trustee	30	X						0	0	0
Dr Richard Ross Vice Chairman	3 00	X		X				0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Dr Read Holland Trustee	60	X						0	0	0
Dr Marian Miller Trustee	1 10	X						0	0	0
Dr Aubrey Lucas Trustee		X						0	0	0
Doug Miller Trustee	2 40	X						0	0	0
Don Baddour Trustee	1 10	X						0	0	0
Bishop Hope Morgan Ward Trustee		X						0	0	0
Bill Davenport Trustee	2 40	X						0	0	0
Bailey Meeks Treasurer	3 00	X		X				0	0	0
Alan Callicott Trustee		X						0	0	0

Software ID:
Software Version:
EIN: 64-0578661
Name: BADDOUR CENTER INC

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
SHOP PARTS & EXPENSES	38,397	38,261	91	45
FUND RAISING EXPENSES	22,131			22,131
FUEL & OIL	54,880	52,960	1,451	469
ENTERTAIN/PUBLIC RELATIONS	39,746	2,214	36,405	1,127
BAD DEBT EXPENSE	16,786		16,786	

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
BADDOUR CENTER INC

Employer identification number

64-0578661

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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

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) <div><input type="checkbox"/> Preservation of land for public use (e g , recreation or pleasure) <input type="checkbox"/> Preservation of an historically importantly land area</div> <div><input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure</div> <div><input type="checkbox"/> Preservation of open space</div>											
2	Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year											
		<table><tr><td></td><td>Held at the End of the Year</td></tr><tr><td>a</td><td>Total number of conservation easements</td></tr><tr><td>b</td><td>Total acreage restricted by conservation easements</td></tr><tr><td>c</td><td>Number of conservation easements on a certified historic structure included in (a)</td></tr><tr><td>d</td><td>Number of conservation easements included in (c) acquired after 8/17/06</td></tr></table>		Held at the End of the Year	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
	Held at the End of the Year											
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 taxable 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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>											
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 170(h)(4)(B)(ii)? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>											
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	▶ \$ _____

Part III

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

3

Using the organization's 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 the 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

	Amount
1c	144,986
1d	571,843
1e	585,168
1f	131,661

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

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	3,027,545	4,004,093		
b	Contributions	661,935	719,524		
c	Investment earnings or losses	351,628	-367,167		
d	Grants or scholarships	61,807	184,980		
e	Other expenditures for facilities and programs	368,067	1,138,733		
f	Administrative expenses	3,949	5,192		
g	End of year balance	3,607,285	3,027,545		

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 25 000 % %

b

Permanent endowment ▶ 75 000 % %

c

Term endowment ▶ %

3a

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

	Yes	No
(i) unrelated organizations	3a(i)	No
(ii) related organizations	3a(ii)	No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	No

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	68,000	528,505		596,505
b Buildings		11,333,376	5,289,148	6,044,228
c Leasehold improvements				
d Equipment		3,124,728	2,668,061	456,667
e Other		2,418,404	1,982,784	435,620
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				7,533,020

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	7,825,453
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	8,276,279
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-450,826
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	-4,606
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-4,606
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-455,432

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements	1	7,541,455
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	16,234
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	16,234
3	Subtract line 2e from line 1	3	7,525,221
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	300,232
c	Add lines 4a and 4b	4c	300,232
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	7,825,453

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	7,996,687
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	20,640
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	20,640
3	Subtract line 2e from line 1	3	7,976,047
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	300,232
c	Add lines 4a and 4b	4c	300,232
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	8,276,279

Part XIVSupplemental 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, 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.

Identifier	Return Reference	Explanation
Part X	Part X FIN48 Footnote	THE CENTER ADOPTED THE PROVISIONS OF FINANCIAL ACCOUNTING STANDARDS BOARD INTERPRETATION NO 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, FOR FISCAL YEAR 2010. THE CENTER BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS.
Part XIII, Line 4b	Part XIII, Line 4b Other revenue amounts included on 990 but not included in F/S	Financial assistance to residents \$300232
Part XII, Line 4b	Part XII, Line 4b Other revenue amounts included on 990 but not included in F/S	Financial assistance to residents \$300232
Part V, Line 4	Part V, Line 4 Intended uses of the endowment fund	THE CENTER'S ENDOWMENT FUNDS WILL BE USED IN ACCORDANCE WITH THE RESTRICTIONS IMPOSED BY DONORS AT THE TIME OF DONATION.
Part IV, Line 1b	Part IV, Line 1b Why is organization an agent, trustee, custodian or other intermediary for contrib	THE CENTER ADMINISTERS THE SPENDING ACCOUNTS OF EACH RESIDENT WHICH INCLUDES MAINTAINING A SEPARATE DEPOSITARY ACCOUNT AT A LOCAL BANK FOR THE AGGREGATE OF RESIDENT FUNDS. DEPOSITS AND WITHDRAWALS ARE MADE AS INSTRUCTED BY THE RESIDENT, PARENT OR LEGAL GUARDIAN AND A SEPARATE ACCOUNTING OF TRANSACTIONS AND ACCOUNT BALANCE BY EACH RESIDENT IS MAINTAINED BY THE CENTER AND REPORTED MONTHLY TO PARENTS OR LEGAL GUARDIANS. THE CENTER ALSO MAINTAINS A SEPARATE DEPOSITARY ACCOUNT FOR A MINISTRIES FUND ESTABLISHED BY THE RESIDENTS USING FUNDS COLLECTED BY THE RESIDENTS EACH SUNDAY AT CHAPEL. THE EXPENDITURE OF THESE FUNDS IS AT THE SOLE DISCRETION OF THE RESIDENTS. THE CENTER DOES NOT CHARGE FOR ITS ADMINISTRATION SERVICES.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
BADDOUR CENTER INC

Employer identification number
64-0578661

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a ☒ Mail solicitations

b ☒ Internet and e-mail solicitations

c ☒ Phone solicitations

d ☒ In-person solicitations

e ☒ Solicitation of non-government grants

f ☐ Solicitation of government grants

g ☒ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? ☐ Yes ☒ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.
TN,MS,FL

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		<u>Fashion Show</u> (event type)	<u>Golf Tournament</u> (event type)	(total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts	73,015	62,837	135,852
	2	Less Charitable contributions	43,649	40,504	84,153
	3	Gross income (line 1 minus line 2)	29,366	22,333	51,699
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes	6,292		6,292
	6	Rent/facility costs	6,244	8,500	14,744
	7	Food and beverages	14,279	5,773	20,052
	8	Entertainment			
	9	Other direct expenses	8,843	1,768	10,611
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			51,699
	11	Net income summary Combine lines 3, column d, and line 10. ▶			

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Combine lines 1, column d, and line 7 ▶			

		Yes	No
9	Enter the state(s) in which the organization operates gaming activities _____		
a	Is the organization licensed to operate gaming activities in each of these states?	9a	
b	If "No," Explain _____ _____		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b	If "Yes," Explain _____ _____		
11	Does the organization operate gaming activities with nonmembers?	11	
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

		Yes	No
13	Indicate the percentage of gaming activity operated in		
a	The organization's facility 13a		
b	An outside facility 13b		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
Name ► _____			
Address ► _____			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____		
c	If "Yes," enter name and address		
Name ► _____			
Address ► _____			
16	Gaming manager information		
Name ► _____			
Gaming manager compensation ► \$ _____			
Description of services provided ► _____			
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
17	Mandatory distributions		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____		

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
BADDOUR CENTER INC

Employer identification number
64-0578661

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☒

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
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2

Enter total number of section 501(c)(3) and government organizations

0

3

Enter total number of other organizations

0

SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

Name of the organization
BADDOUR CENTER INC

Employer identification number
64-0578661

Part ITypes of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art	X	7	725	comp sales
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		110	comp sales
5 Clothing and household goods	X		1,636	comp sales
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	2	10,727	
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles	X	11	890	comp sales
19 Food inventory	X	14	910	comp sales
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
Life				
25 Other ► (Insurance)	X	1	309,027	policy values
26 Other ► (Misc)	X	5	2,994	comp sales
Auction				
27 Other ► (Items)	X	45	10,185	comp sales
Food				
28 Other ► (Services)	X	5	15,129	comp sales
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement				29

30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	Yes	No
b	If "Yes," describe the arrangement in Part II		
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?		No
b	If "Yes," describe in Part II		
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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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 BADDOUR CENTER INC	Employer identification number 64-0578661
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Identifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	THE CENTER PROVIDES COPIES OF ITS GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY , CODE OF ETHICS AND FINANCIAL STATEMENTS UPON REQUEST
Form 990, Part VI, Line 15b	Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	THE BADDOUR CENTER'S COMPENSATION PLAN IS THE BASIS FOR DETERMINING SALARY RANGES FOR ALL EMPLOYEES. THE PLAN UTILIZES A SERIES OF COMPENSABLE FACTORS TO ANALYZE RESPECTIVE JOB DESCRIPTIONS AND ESTABLISH JOB/PAY GRADES AND ACCOMPANYING SALARY RANGES. GRADES CLASSIFY BETWEEN 5 AND 25. IDEALLY, EACH GRADE'S MID-POINT IS ALIGNED WITH MARKET. THE PLAN IS STRATEGICALLY DESIGNED SO THAT UPWARD (OR DOWNWARD) CHANGES AND/OR FLUCTUATIONS TO A SPECIFIC CLASSIFICATION(S) DOES NOT NEGATIVELY IMPACT THE OVERALL INTEGRITY OF THE PLAN. EMPLOYEES WHOSE EVALUATION SCORES MEET CERTAIN KNOWN LEVELS ARE ELIGIBLE FOR MERIT INCREASES. THE PERCENTAGE OF INCREASE CORRELATES TO THE PROJECTED CPI AND IS AFFIRMED BY THE CENTER'S BOARD OF TRUSTEES. IF AND WHEN AVAILABLE, EMPLOYEE BONUSES ARE ESTABLISHED USING SIMILAR FORMULAS. HUMAN RESOURCES MIGHT ALSO SOMETIMES BE REQUIRED TO ADJUST (IE, INCREASE) CERTAIN EMPLOYEES/GRADES IN ORDER TO PREVENT COMPRESSION AND/OR INVERSION OF A GRADE/RANGE. THE EXECUTIVE DIRECTOR'S INITIAL SALARY WAS SET BY THE BOARD OF TRUSTEES, AND THE CHIEF FINANCIAL OFFICER'S INITIAL SALARY WAS SET BY THE EXECUTIVE DIRECTOR. BOTH WERE DONE WITHIN THE FRAMEWORK OF THE COMPENSATION PLAN. ANY SUBSEQUENT INCREASES FOR EITHER POSITION ARE CONSISTENT WITH THE AFOREMENTIONED POINTS OF THE COMPENSATION PLAN. ANY POTENTIAL INCREASES AND/OR BONUSES WHICH MIGHT FALL OUTSIDE OF THE PLAN'S GUIDELINES WOULD HAVE TO BE REVIEWED/APPROVED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES. THE CHAIRPERSON OF THE HUMAN RESOURCES COMMITTEE, AN INDEPENDENT MEMBER OF THE BOARD OF TRUSTEES, ANNUALLY REVIEWS THE COMPENSATION OF THE EXECUTIVE DIRECTOR AND THE CHIEF FINANCIAL OFFICER UTILIZING VARIOUS FINANCIAL REPORTS AS WELL AS SALARY DATA FOR THE STATE OF MISSISSIPPI. IN ADDITION, CONTACTS ARE MADE WITH BOARD MEMBERS AND OTHER EXECUTIVE PERSONNEL ASSOCIATED WITH OTHER 501(C)(3) CHARITABLE ORGANIZATIONS TO SOLICIT COMPENSATION INFORMATION REGARDING THEIR CHIEF EXECUTIVE AND FINANCIAL OFFICERS. A FORMAL LETTER OF FINDINGS IS PROVIDED TO MEMBERS OF THE AUDIT COMMITTEE, CHAIRMAN OF THE FINANCE AND INVESTMENT COMMITTEE AND CHAIRPERSON OF THE BOARD OF TRUSTEES AS PART OF THEIR ANNUAL REVIEW OF FORM 990 AS TO WHETHER THE COMPENSATION OF THE EXECUTIVE DIRECTOR AND CHIEF FINANCIAL OFFICER IS (1) CONSISTENT WITH THE GATHERED INFORMATION, (2) CONSISTENT WITH THE BADDOUR CENTER'S APPROVED COMPENSATION PLAN AND (3) APPROPRIATE FOR THE SCOPE OF SERVICES EXPECTED FROM THESE TWO POSITIONS.
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	THE CENTER REQUESTS AN ANNUAL REPRESENTATION FROM EACH TRUSTEE REGARDING COMPLIANCE WITH THE CENTER'S CONFLICTS OF INTEREST POLICY AND CODE OF ETHICS. THE EXECUTIVE COMMITTEE MUST APPROVE TRASACTIONS WITH RELATED PARTIES THAT EXCEED A MINIMUM THRESHOLD AND, EACH QUARTER, A REPORT OF ALL RELATED PARTY TRANSACTIONS IS PRESENTED TO THE EXECUTIVE COMMITTEE.
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	FORM 990 IS REVIEWED BY EACH MEMBER OF THE CENTER'S AUDIT COMMITTEE, THE CHARIPERSON OF THE FINANCE AND INVESTMENT COMMITTEE AND THE CHAIRPERSON OF THE BOARD OF TRUSTEES. A COPY OF FROM 990 IS MAILED IN A TIMELY MANNER TO EACH MEMBER OF THE BOARD OF TRUSTEES PRIOR TO THE FILING DUE DATE.
Form 990, Part VI, Line 2	Form 990, Part VI, Line 2 Description of Business or Family Relationship of Officers, Directors, Et	DOUG MILLER - HUSBAND OF TRUSTEE, DR. MARIAN MILLER. DR. MARIAN MILLER - WIFE OF TRUSTEE, DOUG MILLER. PAUL BADDOUR - FATHER OF TRUSTEES PAUL BADDOUR, JR. AND KRISTEN BADDOUR. MONTGOMERY, BROTHER OF TRUSTEE DON BADDOUR, UNCLE OF TRUSTEE SHEA BADDOUR. VEAZEY AND COUSIN OF TRUSTEE MARGY GRAHAM. PAUL BADDOUR, JR. - SON OF TRUSTEE PAUL BADDOUR, BROTHER OF TRUSTEE KRISTEN BADDOUR. MONTGOMERY, NEPHEW OF TRUSTEE DON BADDOUR, COUSIN OF TRUSTEE SHEA BADDOUR. VEAZEY AND SECOND COUSIN OF TRUSTEE MARGY GRAHAM. KRISTEN BADDOUR MONTGOMERY - DAUGHTER OF TRUSTEE PAUL BADDOUR, SISTER OF TRUSTEE, PAUL BADDOUR, JR., NIECE OF TRUSTEE DON BADDOUR, COUSIN OF TRUSTEE SHEA BADDOUR. VEAZEY AND SECOND COUSIN OF TRUSTEE MARGY GRAHAM. SHEA BADDOUR. VEAZEY - DAUGHTER OF TRUSTEE DON BADDOUR, NIECE OF TRUSTEE PAUL BADDOUR, COUSIN OF TRUSTEES PAUL BADDOUR, JR. AND KRISTEN BADDOUR. MONTGOMERY AND SECOND COUSIN OF TRUSTEE MARGY GRAHAM.