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A For the 2009 calendar year, or tax year beginning 04-01-2009 , and ending 03-31-2010				
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization Harvester Ministries		D Employer identification number 75-2266769
		Number and street (or P O box, if mail is not delivered to street address) P O Box 860639		E Telephone number (972) 693-1414
		City or town, state or country, and ZIP + 4 Plano, TX 750860639		F Group Exemption Number ▶

☒ **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**
☐ **Accounting method** ☒ Cash ☐ Accrual
 Other (specify) ▶

I Website: <input type="checkbox"/> www.harvestministries.org	H Check <input type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)
J Tax-Exempt status (check only one)— <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	



K Check <input checked="" type="checkbox"/> if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.		
L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ		\$ 94,263

Part I		Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)	
Revenue	1	Contributions, gifts, grants, and similar amounts received	1 94,221
	2	Program service revenue including government fees and contracts	2
	3	Membership dues and assessments	3
	4	Investment income	4 42
	5a	Gross amount from sale of assets other than inventory	5a
	b	Less cost or other basis and sales expenses	5b
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming , check here  	
	a	Gross revenue (not including \$ _of contributions reported on line 1)	6a
	b	Less direct expenses other than fundraising expenses	6b
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c
	7a	Gross sales of inventory, less returns and allowances	7a
	b	Less cost of goods sold	7b
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8	Other revenue (describe  _____)	8	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 	9 94,263	

Expenses	10	Grants and similar amounts paid (attach schedule) 	10	3,956
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	36,406
	13	Professional fees and other payments to independent contractors	13	500
	14	Occupancy, rent, utilities, and maintenance	14	1,368
	15	Printing, publications, postage, and shipping	15	6,388
	16	Other expenses (describe )	16	52,501
	17	Total expenses. Add lines 10 through 16 	17	101,119

Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-6,856
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	15,914
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year Combine lines 18 through 20	21	9,058

Part II Balance Sheets—If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)		(A) Beginning of year	(B) End of year	
22	Cash, savings, and investments	12,490	22	7,002
23	Land and buildings		23	
24	Other assets (describe  _____)	3,424	24	2,056
25	Total assets	15,914	25	9,058
26	Total liabilities (describe  _____)	0	26	0
27	Net assets or fund balances (line 27 of column (B) must agree with line 21) .	15,914	27	9,058

Part III Statement of Program Service Accomplishments (See the instructions for Part III)		Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)	
What is the organization's primary exempt purpose? SEE ATTACHMENT			
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title			
28 See Additional Data Table			
(Grants \$)	If this amount includes foreign grants, check here . . . <input type="checkbox"/>	28a	
29			
(Grants \$)	If this amount includes foreign grants, check here . . . <input type="checkbox"/>	29a	
30			
(Grants \$)	If this amount includes foreign grants, check here . . . <input type="checkbox"/>	30a	
31 Other program services (attach schedule)			
(Grants \$)	If this amount includes foreign grants, check here . . . <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a)		32	53,744

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)				
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

Part VOther Information (Note the statement requirements in the instructions for Part V.)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	No
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	No
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033 (e) notice, reporting, and proxy tax requirements?	35a	No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶	37a	0
b	Did the organization file Form 1120-POL for this year?	37b	
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? . . .	38a	No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved .	38b	
39	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on line 9	39a	
b	Gross receipts, included on line 9, for public use of club facilities	39b	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0 , section 4912 ▶ 0 , section 4955 ▶ 0		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b	No
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . ▶ 0		
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ▶ 0		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	No
41	List the states with which a copy of this return is filed ▶		
42a	The organization's books are in care of ▶ Frank Carmical Telephone no ▶ (972) 693-1414 PO Box 860639 Located at ▶ Plano, TX ZIP + 4 ▶ 750860639		
b	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)? 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.	42b	No
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country ▶	42c	No
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of Form 990-EZ.	44	No
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes", Form 990 must be completed instead of Form 990-EZ.	45	No

Part VI

Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.
All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

46	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	Yes	No
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		No
48	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
49a	Did the organization make any transfers to an exempt non-charitable related organization?		No
49b	If "Yes," was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

50(f) Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

51(d) Total number of other independent contractors each receiving over \$100,000

Please Sign Here	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		2010-10-21 Date		
Paid Preparer's Use Only	Preparer's signature Howard P Dreyer CPA		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 (214) 346-5800
	PHILIP VOGEL & CO PC 12400 Coit Road Suite 1000 Dallas, TX 752512005				
	May the IRS discuss this return with the preparer shown above? See instructions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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 Harvester Ministries	Employer identification number 75-2266769
--	--

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.")						
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						
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						

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						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)						12
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	
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	
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.")	98,907	87,116	97,321	87,240	94,221	464,805
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	98,907	87,116	97,321	87,240	94,221	464,805
7aAmounts included on lines 1, 2, and 3 received from disqualified persons	6,375	9,038	13,183	6,270	7,845	42,711
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						0
cAdd lines 7a and 7b	6,375	9,038	13,183	6,270	7,845	42,711
8Public Support (Subtract line 7c from line 6)						422,094

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	98,907	87,116	97,321	87,240	94,221	464,805
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	58	364	198	46	42	708
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b	58	364	198	46	42	708
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.)	98,965	87,480	97,519	87,286	94,263	465,513
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	<input type="checkbox"/>					

Section C. Computation of Public Support Percentage

15Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	90.670 %
16Public support percentage from 2008 Schedule A, Part III, line 15	16	90.710 %

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	0.150 %
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	0.160 %
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	<input type="checkbox"/>	
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	<input type="checkbox"/>	
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions	<input type="checkbox"/>	

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

Additional Data

Software ID:

Software Version:

EIN: 75-2266769

Name: Harvester Ministries

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for 501(c)(3) and 501(c)(4) organizations and 4947(a)(1) trusts; optional for others.)	
28 evangelistic ministry (Grants \$ 0) If this amount includes foreign grants, check here . . . <input type="checkbox"/>	28a	43,981
29 PUBLICATIONS MINISTRY (Grants \$ 0) If this amount includes foreign grants, check here . . . <input type="checkbox"/>	29a	2,913
30 gifts to foreign churches (Grants \$ 0) If this amount includes foreign grants, check here . . . <input type="checkbox"/>	30a	2,894
SEE ATTACHMENT 1 (Grants \$ 0) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		3,956

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
frank carmical PO Box 860639 Plano, TX 75086	Pres/Treasurer 40 00	33,910	2,496	0
tery brown PO Box 860639 Plano, TX 75086	ceo/secretary 0 50	0	0	0
Caroline Buie pO Box 860639 plano, TX 75086	Vice President 0 50	0	0	0
Abe Johnson pO Box 860639 plano, TX 75086	Secretary 0 50	0	0	0
Mac Rogers pO Box 860639 plano, TX 75086	Director 0 50	0	0	0

TY 2009 Grants and Similar Amounts Paid Schedule

Name: Harvester Ministries

EIN: 75-2266769

Item No.	1
Class of Activity	
Donee's Name	see attachment 1
Donee's Address	
Amount (FMV)	3,956
Purpose of Payment to Affiliate	
Relationship	None
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

TY 2009 Other Assets Schedule

Name: Harvester Ministries

EIN: 75-2266769

Description	Beginning of Year Amount	End of Year Amount
Other Depreciable Assets	3,424	2,056

TY 2009 Other Expenses Schedule

Name: Harvester Ministries

EIN: 75-2266769

Description	Amount
administrative expenses	2,713
evangelistic ministry	43,981
publications ministry	2,913
gifts to foreign churches - SEE ATTACHMENT 3	2,894
see attachment 4 for detail	

**TY 2009 Transfers Personal Benefits
Contracts Declaration**

Name: Harvester Ministries

EIN: 75-2266769

Declaration: The organization did not, during the year, receive any funds, directly,or indirectly, to pay premiums on a personal benefit contract.The organization, did not, during the year, pay any premiums, directly,or indirectly, on a personal benefit contract.

Attachment 1 to Form 990 EZ
Tax year 2009
Harvester Ministries, Inc.
EIN: 75-2266769

Part I, line 10: Schedule of Amounts Paid
Part III, line 31a: Grants

Names and addresses of donees:

This Program Service, "Humanitarian Ministry to Foreign Nationals," includes financial assistance to people in different countries of the world, including foreign nationals living in the USA. All individuals or families fall below the poverty level in their respective countries. Names and current addresses (at the time of assistance) of these people are available in Harvester Ministries' records.

All of the individuals and families assisted in the "Hispanics" categories below are migrant workers from Latin America, mainly from Mexico and Central America. Since they reside in the USA from 6 to 9 months per year and change addresses often, they can be described as transient or indigent. Their names and addresses are available in Harvester Ministries' records, but many change addresses more than once a year.

Relationship of donees to Harvester Ministries:

None of the individuals or families in the categories listed below are related by blood, marriage, adoption, or employment to any person with an interest in Harvester Ministries, including its donors, directors, and officers.

No interest, application fees, or other charges were made to any persons who received assistance.

Class of Activity: Amount Given: Amount Reimbursed:

Recipients:

Clothing:

Hispanics in USA	161.53
Total:	\$ 161.53

Education:

Peru	100.00
Russia	150.00
Total:	\$ 250.00

Legal:

Hispanics in USA	\$ 100.00
Total:	\$ 100.00

(continued on next page)

Attachment 1 to Form 990 EZ
Tax year 2009
Harvester Ministries, Inc.
EIN: 75-2266769

Part I, line 10: Schedule of Amounts Paid
Part III, line 31a: Grants

Page 2 of 2(continued from previous page)

Class of Activity: Amount Given: Amount Reimbursed:

Recipients:

Food:

Peru	322.91	
Russia	400.00	
Hispanics in USA	\$ 524.50	
Total:	\$ 1,247.41	

Funerals:

Hispanics in the USA	\$ 265.00	
Total:	\$ 265.00	

Housing:

Hispanics in USA	\$ 948.76	
Total:	\$ 948.76	

Loans:

Hispanics in USA	\$ 10.00	0.00
Total:	\$ 10.00	0.00

Medical Help:

Indonesia	\$ 15.96	
Peru	230.00	
Russia	100.00	
Hispanics in USA	83.84	
Total:	\$ 429.80	

Transportation:

Peru	\$ 50.00	
Hispanics in USA	\$ 7.00	
Total:	\$ 57.00	

Utilities:

Hispanics in USA:	\$ 486.66	
Total:	\$ 486.66	

Total Assistance: \$ 3,956.16

Attachment 2 to Form 990 E2
Tax year 2009
Harvester Ministries, Inc.
EIN: 75-2266769

Part III, lines 28-31
Statement of Program Services Accomplished:

Mr. Frank Carmical is President and Evangelist of Harvester Ministries and its sole employee. Mr. Carmical divides his time between the 4 major ministries listed below. He works and is directly involved in all the following activities:

Evangelistic Ministry

Preached and taught 19 times in 9 states (Florida, Illinois, Louisiana, Maine, Massachusetts, New Jersey, Oklahoma, Texas, and Washington) and 79 times in 7 countries (Burundi, Indonesia, Jamaica, Mexico, Peru, Russia, and Taiwan) to over 8,000 people. This ministry included speaking at conferences, seminars, and workshops in public auditoriums as well as in services and classes held in churches.

Humanitarian Ministry to Foreign Nationals

Assisted and ministered to 21 Hispanic individuals and families in the North Texas area with food, clothing, educational, medical, housing, transportation, legal, and immigration matters as well as spiritual counsel and advice. Assisted and ministered to 9 families in 3 countries with humanitarian help as well as spiritual counsel and advice.

Gifts to Foreign Churches

This ministry is a sub-set of both the evangelistic and ministry to foreign nationals. It helps churches overseas made up of foreign nationals to achieve their goals by contributing specific amounts to projects for buildings, equipment, programs, literature, and their own community and humanitarian efforts. These funds are always distributed directly to the pastor and leaders of the churches.

Publications Ministry

Wrote, edited, and proofread Biblical and theological materials and lessons. These materials, including powerpoint presentations, were used in seminars, conferences, workshops, and classes around the world as well in churches where Mr. Carmical has ministered in the USA. This ministry included research for future writing and teaching projects. Development of the website still awaits funding and technical assistance.

(continued on next page)

Attachment 2 to Form 990 EZ
Tax year 2009
Harvester Ministries, Inc.
EIN: 75-2266769

Part III, lines 28-31
Statement of Program Services Accomplished:

(continued from previous page)

PLEASE NOTE: The former category "Ministry at Plano Bible Chapel" ended in 2006, which was the final year for Mr. Carmical to serve as Elder and Pastor at the church. Due to his increased foreign ministries and opportunities, Mr. Carmical was no longer able to carry out his past duties at the church. However, from time to time, Mr. Carmical has continued to teach, preach, or advise at the church.

Also note that Mr. Carmical's ministry to local Hispanic immigrants, as reflected above in "Humanitarian Ministry to Foreign Nationals", has continued to benefit the Spanish-speaking church being planted by Plano Bible Chapel by serving and helping workers who are within the community.

Attachment 3 to Form 990 EZ
Tax year 2009
Harvester Ministries, Inc.
EIN: 75-2266769

Part III, line 30a
Other Program Services:

Gifts to Foreign Churches

This ministry donated money for the support of foreign national missionaries, the construction of church buildings or facilities where those missionaries work, the repair of equipment in those churches, the purchase of literature, supplies, and equipment for those churches and funding of programs within them. These gifts were made in the following countries and in these amounts:

Burundi	\$	200.00
Indonesia	\$	404.47
Jamaica	\$	200.00
Mexico	\$	350.00
Peru	\$	200.00
Russia	\$	1,040.00
Taiwan	\$	500.00
<hr/>		
Total:	\$	2,894.47

Attachment 4 to Form 990 EZ
Tax year 2009
Harvester Ministries, Inc.
EIN: 75-2266769

Part I, line 16: Other expenses (describe):

Program Services:

Evangelistic Ministry (Part III, line 28)	\$ 43,981.03
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Publications Ministry (Part III, line 29)	\$ 2,913.30
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Gifts to Foreign Churches (Part III, line 30)	\$ 2,894.47
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Humanitarian Ministry To Foreign Nationals Part III, line 31)	\$ 3,956.16
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(Note: the entire amount for this program service consisted of Part I, line 10: "Grants and similar amounts paid to individuals" \$ 3,956.16)

Total Program Services:	<u>\$ 53,744.96</u>
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Administrative Expenses:	<u>\$ 2,713.03</u>
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Total Expenses:	\$ 56,457.99
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Subtract:	
Humanitarian Ministry To Foreign Nationals Part III, line 31 because it is already counted on Part I, line 10	<u>- 3,956.16</u>

Total Expenses: (Part I, line 16)	\$ 52,501.83
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Schedule A (Form 990 EZ)
Tax year 2009
Harvester Ministries, Inc.
EIN: 75-2266769

Part III, line 7a: Support Schedule

Disqualified person:

(e) 2009	\$	65.00
(f) Total	\$	<u>65.00</u>

Disqualified person:

(e) 2009	\$	100.00
(f) Total	\$	<u>100.00</u>

Disqualified person: Caroline Buie

(e) 2009	\$	1,250.00
(f) Total	\$	<u>1,250.00</u>

Disqualified person:

(a) 2005	\$	1,000.00
(b) 2006	\$	2,300.00
(c) 2007	\$	1,696.00
(d) 2008	\$	1,750.00
(e) 2009	\$	2,750.00
(f) Total	\$	<u>9,496.00</u>

Disqualified person:

(a) 2005	\$	4,875.00
(b) 2006	\$	5,462.50
(c) 2007	\$	7,487.00
(d) 2008	\$	3,920.00
(e) 2009	\$	2,080.00
(f) Total	\$	<u>23,824.50</u>

Disqualified person:

(a) 2005	\$	500.00
(b) 2006	\$	1,275.00
(c) 2007	\$	4,000.00
(d) 2008	\$	600.00
(e) 2009	\$	1,600.00
(f) Total	\$	<u>7,975.00</u>

Total of All Donors:	\$	42,710.50
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Disqualified persons for fiscal year 2009-2010:

	65.00
	100.00
	1,250.00
\$	2,750.00
	2,080.00
	1,600.00
Total:	<u>\$ 7,845.00</u>

Disqualified persons for fiscal year 2008-2009:

\$	1,750.00
	3,920.00
	600.00
Total:	<u>\$ 6,270.00</u>

Disqualified persons for fiscal year 2007-2008:

\$	1,696.00
	7,487.00
	4,000.00
Total:	<u>\$ 13,183.00</u>

Disqualified persons for fiscal year 2006-2007:

\$	2,300.00
	5,462.50
	1,275.00
Total:	<u>\$ 9,037.50</u>

Disqualified persons for fiscal year 2005-2006:

\$	1,000.00
	4,875.00
	500.00
Total:	<u>\$ 6,375.00</u>

Total of all Disqualifed Persons:

\$ 42,710.50

Attachment 1 to Schedule A (Form 990 EZ)
Tax year 2009
Harvester Ministries, Inc.
EIN: 75-2266769

Statement of how recipients qualify to receive assistance

Individuals or families who receive charitable assistance from Harvester Ministries must meet the following criteria:

1. Their need is genuine (emergency, injury, illness, cannot read English, empty kitchen or closets)
2. They have no other means of assistance, such as family, friends, employer, public or government agency, or charitable organization or church, or such support does not provide assistance in the area requested.
3. Does Mr. Carmical, based on his years of experience working, see this as a genuine need?
4. Does Harvester Ministries have sufficient funds, resources, or other forms of assistance to help?

In the USA, those who receive assistance are all Hispanic people from Mexico or Latin America. They are indigent, migrant workers and their families, with annual incomes below the USA poverty level. No discrimination is made on the basis of legal status in the U.S. nor on the basis of age, race, sex, religion, or sexual orientation.

Whenever possible, Mr. Carmical personally handles each case, which includes buying and delivering groceries or medicine, paying the bill, transporting the person to the doctor, hospital, employer, court or immigration office. Records are kept for each person and transaction.

Repayment of food, clothes or medication is never requested or accepted. Repayment of paid medical, rent, or utility bills is accepted when recipients are able to pay. No interest, application fees, or other charges are made or received from those seeking help.

Mr. Carmical continues to fill out immigration and other forms in English. These matters involve his donation of time, but involve no expenditure for the assistance.

In foreign countries, Mr. Carmical discusses the needs of those inquiring with local church leaders or the local missionary. He then tries to speak personally with those in need, either directly or through an interpreter. The decision to give assistance is made according to the same criteria listed above for the USA. Wherever possible funds are used to buy food or clothes or other items directly or those funds are left with a responsible party for disbursement.