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Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

5 Total number of employees (Part V, line 2a)	Internal	Revenue	Service	► The or	rganization may have to us	е а сору о	f this return to satisfy s	tate reporting	requirements	Inspection		
Recent and actions compared the many chains of continued the part of the continued continued the continued continued continued the continued con	A Fo	r the	2009 cal	endar yea		-01-2009	and ending 05-31-201	0	D Employer id	antification number		
Supplementation Supplement	_											
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Composition per langer Composition Co	_					ox if mail is	not delivered to street addre	ss) Room/suite				
## Apparents proving F Name and address of principal officer 1300 Crassent 55 Wheeton, IL 50187 Wheeton Type of an intrinsic included? Type Find	_			tions.								
F. Name and address of principal officer Line Barnis						, and ZIP +	4					
Lane Dennis 1300 Creacent 15 Wheton, IL 60187 Web Into 1, 160187	App	olication	n pending		·							
Total gross unrelated business revenue (Part VIII, column (A), lines 12 Part Viver (Part VIII, column (A), lines 12 Part Viver (Part VIII, column (A), lines 12 Part Viver (Part VIII, column (A), lines 12 Part VIII, column (A), lines 13 Part VIII, column (A), lines 14 Part VIII, column (A), lines 14 Part VIII, column (A), lines 15 Part VIII, column (A), lines 15 Part VIII, column (A), lines 16 Part VIII, column (A), lines 17 Part VIII, column (A), lines 18 Part VIII, column (A), lines 19 Part VIII, column (A), lines						officer						
To receive stable Solicy (3) (meet no.) 4967(a)(1) or S27 H(c) Group exemption number				1300 0	Crescent St			affilia	ates?	I Yes I✓ No		
Tax-executes status				Wheato	on,IL 60187			H(b) Are a	ll affiliates inclu	ded?		
Nebaltes	 т Та	x-exem	npt status	▼ 501(c)) (3) 4 (insert no)	(a)(1) or [- 527	l _				
Number of long-notation F Corposition Tailx Association Ottes National Control			<u> </u>			(4)(1) 0. 1	327	H(c) Grou	ap exemption ni	umber F		
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### Series of the programments of the organization's mission or most significant activities To proclaim the gospel and the truth of God's Word through publishing and all other means To proclaim the gospel and the truth of God's Word through publishing and all other means					tion Trust Association C	Other 🟲		L Year of fo	ormation 1938	M State of legal domicile IL		
To proclaim the gospel and the truth of God's Word through publishing and all other means	Pa			•	e organization's mission or	most siai	nificant activities					
A Number of independent voting members of the governing body (Part VI, line 1a) 5 5 5 5 5 5 5 5 5		_	•		-	_		other means				
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A Number of independent voting members of the governing body (Part VI, line 1a) 5 5 5 5 5 5 5 5 5	<u>₹</u>	2	Check th	nis box 🛏	ıf the organization discor	ntinued its	operations or disposed	of more than	25% of its net	assets		
Not unrelated business revenue from Part VIII, column (L), line 12 9 9 1 432,426		3	Number	of voting r	members of the governing b	oody (Part	VI, line 1a)		3	3 9		
Not unrelated business revenue from Part VIII, column (L), line 12 9 9 1 432,426	න් ආ	4	Number	ofındeper	ndent voting members of th	e governır	ng body (Part VI, line 1t)	. 4	14		
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Not unrelated business revenue from Part VIII, column (L), line 12 9 9 1 432,426		6	Total nu	mber of vo	olunteers (estimate if neces	ssary) .			•	5 6		
Properties Pro	⋖	7a	Total gro	ss unrela	ted business revenue from	Part VIII	, column (C), line 12 .		7	'a0		
88 Contributions and grants (Part VIII, line 1h) 95,241 432,426 10 Investment income (Part VIII, line 2p) 0 0 11 Other revenue (Part VIII, column (A), lines 3, 4, and 7d) -2,757 0 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 1-2) 10,910,754 11,694,047 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 102,700 64,292 14 Benefits paid to or for members (Part IX, column (A), lines 1-3) 102,700 64,292 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a 16 Professional fundraising fees (Part IX, column (A), line 11e) 0 17 Other expenses (Part IX, column (A), line 11e) 0 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 10,849,187 10,164,927 19 Revenue less expenses Subtract line 18 from line 12 62,991,446 51,94,095 19 Total lassiets (Part X, line 26) 8,940,661 7,961,368 10 Total lassiets (Part X, line 26) 8,940,661 7,961,368 10 Total lassiets (Part X, line 26) 8,940,661 7,961,368 10 Total lassiets of fund balances Subtract line 21 from line 20 6,598,016 8,127,136 10 Proparer's Signature Block 8,940,661 7,961,368 10 Proparer's Signature of officer 8,940,661 7,961,368 11 Proparer's Signature of officer 8,940,661 7,961,368 12 Proparer's Signature of officer 8,940,661 7,961,368 13 Proparer's Signature of officer 8,940,661 7,961,368 14 Proparer's Signature of officer 8,940,661 7,961,368 15 Proparer's Signature of officer 8,940,661 7,961,368 16 Proparer's Signature of officer 8,940,661 7,961,368 17 Proparer's Signature of officer 8,940,661 7,961,368 18 Proparer's Signature of officer		b	Net unre	lated busi	iness taxable income from	Form 990	-T, line 34			'b 0		
9						Pric	or Year	Current Year				
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10	Š											
Table 12)	_							_	10,818,270	11,261,621		
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		12				•		e	10,910,754	11,694,047		
Salaries, other compensation, employee benefits (Part IX, column (A), lines 5- 10) Professional fundraising fees (Part IX, column (A), line 11e)		13							102,700	64,292		
10 16a Professional fundraising fees (Part IX, column (A), line 11e)		14	Benefit	s paid to c	or for members (Part IX, co	lumn (A),	line 4)			0		
Total expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	ø	15		s, other co	ompensation, employee ber	nefits (Par	t IX, column (A), lines 5	5-	4 4 5 5 0 4 1	4 906 540		
Total expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	DS-6	163	•	uonal fund	Iraicing foos (Part IV colur	mn (A.) lin	o 11o)		4,433,041			
Total expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	Φ ⊕						•					
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Beginning of Current Year 20 Total assets (Part X, line 16)												
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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. ****** 2011-04-07			_			21 from lin	e 20		6,598,016	8,127,136		
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 ******* 2011-04-07	Pal	τ 11				nined this re	turn including accompanying	schedules and s	tatements and to	the hest of my knowledge		
Firm's name (or yours if self-employed), address, and ZIP + 4 Greenwood, IN 46143 Paul Thomas VP of Finance Date Check if self-employed Firm's name (or yours if self-employed), address, and ZIP + 4 Greenwood, IN 46143												
Firm's name (or yours if self-employed), address, and ZIP + 4 Greenwood, IN 46143 Paul Thomas VP of Finance Date Check if self-employed Firm's name (or yours if self-employed), address, and ZIP + 4 Greenwood, IN 46143	Sian			la de								
Paul Thomas VP of Finance Type or print name and title Preparer's signature Preparer's signature Preparer's signature Todd Ensign Date Check if self-empolyed Firm's name (or yours if self-employed), address, and ZIP + 4 Greenwood, IN 46143 Preparer's identifying number (see instructions) EIN Firm's name (or yours if self-employed), address, and ZIP + 4 Greenwood, IN 46143			I		<u> </u>				-04-07			
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Preparer's Use Only Firm's name (or yours if self-employed), address, and ZIP + 4 Greenwood, IN 46143 Capin Crouse LLP 972 Emerson Parkway STE A Greenwood, IN 46143	Paid		signature Todd Ensign					self-	elf (see instructions)			
Use Only If self-employed), address, and ZIP + 4 Greenwood, IN 46143 FIN ▶ Phone no ▶ (317) 885-2620		arer's	Firm's nar	me (or vour	s L Capin Crouse LLP		· · · · · · · · · · · · · · · · · · ·					
Greenwood, IN 46143 Phone no ▶ (317) 885-2620	•		ıf self-em	ployed),	<u> </u>	Δ			EIN *			
Greenwood, IN 46143			dudiess, d	anu ∠1F ⊤ 4	,,	~			Phone no 🕨 (317) 885-2620			
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Form **990** (2009)

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

Crossway is a not-for-profit ministry that exists solely for the purpose of proclaiming the gospel and the truth of God's Word through publishing and all other means

2	Did the organization the prior Form 990	, -	nt program se	rvices during the year w		Yes 🔽 No
	If "Yes," describe th	nese new services on Sc	hedule O			
3	Did the organization services?	n cease conducting, or m	ake sıgnıfıcar	it changes in how it cond		Yes 🔽 No
	If "Yes," describe th	iese changes on Schedu	le O			
4	Section 501(c)(3) a	and 501(c)(4) organizati	ons and section	-	rgest program services by ex required to report the amour rvice reported	•
4a	(Code) (Expenses \$	4,346,003	ıncludıng grants of \$	31,676) (Revenue \$	5,083,092)
	Altogether, more than	1 8 million Bibles were distribu	ited both domes	tically and internationally by w	nistry is performed by the sales and ray of sales and distribution. The di- fund a Bible project in China in the	stribution of Bibles were given
4b	(Code) (Expenses \$	3,183,371	ıncludıng grants of \$	12,616) (Revenue \$	4,963,438)
		1 7 million books were sold/d			inistry is performed by the sales and The distribution of books was to a	
	(Code) (Expenses \$	399,586	including grants of \$	0)(Revenue\$	595,481)
-10	Tracts Distribution Pub gospel tracts Altogethe	olishing Christian literature for	the purpose of s were distributed	preading the gospel of Jesus C	Christ This ministry is performed by ationally The distribution of tracts v	the sales and distribution of
	Other program ser	vicas (Dascriba in Scha	dula O \ See	also Additional Data for	Description	
Tu	(Expenses \$	•	uding grants o		00) (Revenue \$	134,702)
4e	Total program serv	vice expenses►\$	8,004,87	7		

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	CHECK	MISL OI	Reuulleu	Julicuules

			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		
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		No
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, line10? 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	Į		
13	Is the organization a school described in section $170(b)(1)(A)(II)^7$ 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	Yes	
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	Yes	
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		Νο
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		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο

Par	t 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? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	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? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Νo
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		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? If "Yes," complete Schedule L, Part II	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? If "Yes," complete Schedule L, Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νο
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</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νο
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	20	Yes	

rt V	Statements	Regarding	Other	TRS F	ilinas	and '	Tax	Comi	oliance
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			Yes	No				
.a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable							
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0							
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c						
!a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes					
а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νο				
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		110				
la	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		Νο				
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts							
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo				
b	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?							
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						
a	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?							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b						
	Organizations that may receive deductible contributions under section 170(c).							
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νο				
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo				
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal							
_	benefit contract?	7e		Νo				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo				
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h						
	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						
	Sponsoring organizations maintaining donor advised funds.							
а	Did the organization make any taxable distributions under section 4966?	9a						
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b						
0	Section 501(c)(7) organizations. Enter							
	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							
1	Section 501(c)(12) organizations. Enter							
а	Gross income from members or shareholders							
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)							
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the							
	year 12B]						

1300 Crescent St Wheaton, IL 60187 (630) 682-4300

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.

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 9			
ь	Enter the number of voting members of the governing body			
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		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νo
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	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 ection B. Policies (This Section B requests information about policies not required by the Internal	9		Νo
	evenue Code.)			
	<u> </u>		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νο
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		.,	
444	Describe on Cabadala O the naverage of any weed by the consequence to account the Fermi COO	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			
С	to conflicts?	12b		Νο
	describe in Schedule O how this is done	12c		Νo
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14		Νo
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?			
	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		Νο
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		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ▶ IL , WA			
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 Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ie orga	nızatıor	n 🕨
	Paul Thomas			

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

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

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

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

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

Check this box if the organization did not compensate any current or former officer, director, trustee or key employee											
(A) Name and Title	(B) Average hours		tion (that a	che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
Lane T Dennis President and Publisher	40 00	х		х				254,373	0	29,514	
Geoffrey L Dennis Executive VP/Secretary	40 00	х		х				137,928	0	12,765	
M Ebeth Dennis Sr VP Publishing	40 00	х		х				65,623	0	0	
James Fellowes Treasurer	5 00	х		х				0	0	0	
R Kent Hughes Board Member	5 00	х						0	0	0	
Jon Dennis Board Member	5 00	х						0	0	0	
Wayne Grudem Board Member	5 00	х						0	0	0	
Mike Parker Board Member	5 00	х						0	0	0	
Paul House Board Member	5 00	х						0	0	0	
Allan Fisher Sr VP Book Publishing	40 00			х				119,433	0	12,049	
Randall D Jahns Sr VP Bible Publishing	40 00			х				120,515	0	12,923	
Dan Kok Sr VP Operations	40 00			х				112,056	0	11,434	
Paul Thomas SR VP Finance	40 00			х				111,821	0	12,120	
Josh Dennis VP Design Services	40 00			х				93,366	0	10,800	
Justin Taylor VP Book Publishing	40 00			х				99,558	0	11,243	

Forr	n 990 (2009)				Page 8
1b	Total	1,114,673	0		112,848
2	Total number of individuals (including but not limited to those listed above) who receiv \$100,000 in reportable compensation from the organization▶6	ed more than	·		
				Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or higher on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual	st compensated employee	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other coorganization and related organizations greater than \$150,000? If "Yes," complete Scheoundividual	•	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated or rendered to the organization? If "Yes," complete Schedule J for such person \cdot \cdot \cdot	ganization for services	5		No
S	ection B. Independent Contractors				
1	Complete this table for your five highest compensated independent contractors that re \$100,000 of compensation from the organization	ceived more than			
	(A) Name and business address	(B) Description of services		(C Comper	
1921	e Marketing 16 SE 46th Place quah, WA 98027	Commissioned Sales Representatives			301,376
250	ioIDM Inc Glenwood Ave Ellyn, IL 60137	IT Services			158,117
512	ginary Landscape LN Ravenswood Ave ago, IL 60640	Web Design			109,750
	-				

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 🕒 3

Form 99			f Davis and					Page 9
Part v	/	Statement of	or 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
ıts ıts	1a	Federated cam	paigns 1a					
)rat our	ь	Membership du	es 1b					
s,ç ami	С	Fundraising eve	ents 1c					
agi a	d	Related organiz	rations 1d					
ns, imi	e	Government grants	s (contributions) 1e					
Contributions, gifts, grants and other similar amounts	f	All other contribution	ons, gifts, grants, and 1f	432,426				
ije je	g	Noncash contri	butions included in					
gut				_	400 406			
ರ≅	h	Total. Add lines	s 1a-1f		432,426			
9				Business Code				
wen	2a							
8	b							
MCe	C							
Program Serwce Revenue	d							
an Lus	е -							
albo	f	All other progra	im service revenue					
₹	g	Total. Add lines	s 2a-2f					
	3	Investment inc	ome (including dividen	ds, interest				
	_		ar amounts)	-				
	4 5		tment of tax-exempt bond	· · · ·	484,908			484,908
		Royalties	(ı) Real	(II) Personal	.0.,,500			10.1,200
	6a	Gross Rents	(i) iteal	(ii) i cisonai				
	ь	Less rental						
	c	expenses Rental income						
	d	or (loss) Net rental inco	me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory Less cost or						
	Ь	other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gaın or (los	s)					
en	8a	Gross income f events (not inc						
Other Revenue		\$of contributions See Part IV , lin						
<u>ier</u>	ь	less director	a penses b					
ŧ o	c		loss) from fundraising	events ►				
	9a		rom gaming activities le 19					
	b c		apenses b (loss) from gaming acti	vities				
		Gross sales of returns and allo	inventory, less					
	ь	_	a oods sold b	21,680,426 10,947,911				
	С		loss) from sales of inve		10,732,515	10,732,515		
	11a	Miscellaneous Miscellaneous		Business Code 900,099	44,198	44,198		
	ь	<u>miscenaneous</u>	mcome		,_56	,		
	c							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d		44.400			
	12	Total revenue.	See Instructions .	▶	44,198	10 776 713	0	494.000
	ı				11,694,047	10,776,713	U	484,908

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

December Part Par		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).										
Part						(D)						
In the U.S. See Part IV, line 21 30,116 30,116 30,116 20 30,116 30,11		• • • • • • • • • • • • • • • • • • • •		Program service	Management and	Fundraising						
3,116 3,1	1											
U. S. See Part IV, lime 21		in the U.S. See Part IV, line 21	30,116	30,116								
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16. 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees. 6 Compensation of current officers, directors, trustees, and described in section 4958(P(11)) and persons (as defined under section 4958(P(11)) and persons (a	2											
organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons (as defined under section 4958(f)(1) and 1958(f)(1)		U.S. See Part IV, line 22	5,000	5,000								
Part IV, lines 15 and 16 8 Henfits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees	3	<u> </u>										
## Benefits paid to or for members		•	29,176	29,176								
Rey employees 1,269,249 740,440 500,233 28,5	4											
Compensation not included above, to disqualified persons (as defined under section 4958 (c)(3)(B)) and persons described in section 401 (k) and section 403 (b) employer contributions (include section 401 (k) and section 403 (b) employer contributions). 199,245 7 Other employee benefits . 683,319 493,430 191,889 7 Payroll taxes . 326,387 246,046 82,341 7 Payroll taxes . 81,600 81,600 8 Anagement	5	Compensation of current officers, directors, trustees, and										
(as defined under section 4958(r)(31)8)		·	1,269,249	740,440	500,233	28,576						
described in section 4958(c)(3)(8) 301,639 301,63	6											
7 Other salaries and wages 2,424,340 2,122,701 301,639 8 Pension plan contributions (include section 401(k) and section 403(k) employer contributions) 199,245 199,245 9 Other employee benefits 685,319 493,330 191,889 11 Fees for services (non-employees) 328,387 246,046 82,341 1 Fees for services (non-employees) 45,498 45,498 a Management 81,600 81,600 45,498 b Legal 45,498 45,498 45,498 d Lobbying 45,498 45,498 45,498 d Lobbying 45,498 45,498 45,498 d Lobying 45,498 45,498 45,498 d Lobying <th< th=""><td></td><td></td><td></td><td></td><td></td><td></td></th<>												
40 3(b) employer contributions) 199,245	7		2,424,340	2,122,701	301,639							
9 Other employee benefits	8											
10 Payroll taxes					199,245							
11 Fees for services (non-employees) 81,600 81,600 b Legal	9		685,319	493,430	191,889							
a Management	10		328,387	246,046	82,341							
b Legal	11											
d Lobbying	а											
d Lobbying	b				· · ·							
Professional fundraising See Part IV, line 17 . f Investment management fees . g Other	С	-	45,498		45,498							
f Investment management fees 650,715 556,962 93,753 g Other 650,715 556,962 93,753 12 Advertising and promotion 1,550,094 1,536,258 13,796 13 Office expenses 244,085 119,098 123,158 1,8 14 Information technology 62,633 6,592 56,041 15 Royalties 212,286 185,186 24,256 2,8 16 Occupancy 212,286 185,186 24,256 2,8 17 Travel 312,412 238,387 74,025 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 223,332 262,964 10,408 20 Interest 318,683 226,265 92,418 92,418 21 Payments to affiliates 273,372 262,265 92,418 21 Payments to affiliates 318,683 226,265 92,418 22 Depreciation, depletion, and amortization 463,265	d											
Q Other												
12 Advertising and promotion	f											
13 Office expenses	_		·	· · · · · · · · · · · · · · · · · · ·	· · · · · ·							
14 Information technology 62,633 6,592 56,041 15 Royalties 212,286 185,186 24,256 2,8 17 Travel 312,412 238,387 74,025 74,025 74,025 75,025					·							
15 Royalties 212,286 185,186 24,256 2,8 17 Travel		·	· · · · · · · · · · · · · · · · · · ·	<u> </u>		1,829						
16 Occupancy 212,286 185,186 24,256 2,88 17 Travel 312,412 238,387 74,025 18 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 273,372 262,964 10,408 20 Interest 318,683 226,265 92,418 21 Payments to affiliates 463,265 431,014 28,867 3,3 22 Depreciation, depletion, and amortization 463,265 431,014 28,867 3,3 23 Insurance 56,646 49,415 6,472 7 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) 481,655 417,509 63,285 8 Miscellaneous 148,669 135,609 12,597 4 Miscellaneous 78,849 78,849 12,294 1,4 4 Ministry projects 78,849 78,849 24,034 24,034 24,034 24,034 24,034 24,034 24,034 24,034 24,034 24,034 24,034 </th <td></td> <td></td> <td>62,633</td> <td>6,592</td> <td>56,041</td> <td></td>			62,633	6,592	56,041							
17 Travel		·										
18 Payments of travel or entertainment expenses for any federal, state, or local public officials						2,844						
state, or local public officials 19 Conferences, conventions, and meetings 273,372 262,964 10,408 20 Interest 318,683 226,265 92,418 21 Payments to affiliates 2 463,265 431,014 28,867 3,3 23 Insurance 56,646 49,415 6,472 7 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) 481,655 417,509 63,285 8 b Miscellaneous 148,669 135,609 12,597 4 c Research & development 107,595 93,860 12,294 1,4 d Ministry projects 78,849 78,849 78,849 e Bad debt 24,034 24,034 24,034 f All other expenses 82,044 82,044 82,044 25 Total functional expenses. Add lines 1 through 24f 10,164,927 8,004,877 2,119,893 40,1 10 Joint costs. Check here (r) if following SOP 98-2 10,164,927 8,004,87			312,412	238,387	74,025							
20 Interest	18											
21 Payments to affiliates	19	Conferences, conventions, and meetings	273,372	262,964	10,408							
22 Depreciation, depletion, and amortization	20	Interest	318,683	226,265	92,418							
23 Insurance	21	Payments to affiliates										
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) 481,655 417,509 63,285 8 a Shipping and Mailing 481,655 417,509 63,285 8 b Miscellaneous 148,669 135,609 12,597 4 c Research & development 107,595 93,860 12,294 1,4 d Ministry projects 78,849 78,849 24,034 24,034 e Bad debt 24,034 24,034 82,044 82,044 f All other expenses 82,044	22	Depreciation, depletion, and amortization	463,265	431,014	28,867	3,384						
grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a Shipping and Mailing	23		56,646	49,415	6,472	759						
a Shipping and Mailing 481,655 417,509 63,285 8 b Miscellaneous 148,669 135,609 12,597 4 c Research & development 107,595 93,860 12,294 1,4 d Ministry projects 78,849 78,849 78,849 e Bad debt 24,034 24,034 24,034 f All other expenses 82,044 82,044 82,044 25 Total functional expenses. Add lines 1 through 24f 10,164,927 8,004,877 2,119,893 40,1 26 Joint costs. Check here ► ☐ if following SOP 98-2 15 displayed and the properties of	24	grouped together and labeled miscellaneous may not exceed 5% of										
b Miscellaneous 148,669 135,609 12,597 4 c Research & development 107,595 93,860 12,294 1,4 d Ministry projects 78,849 78,849 78,849 e Bad debt 24,034 24,034 24,034 f All other expenses 82,044 82,044 82,044 25 Total functional expenses. Add lines 1 through 24f 10,164,927 8,004,877 2,119,893 40,1 26 Joint costs. Check here ► ☐ if following SOP 98-2 1 2 1 2 1 2 1 2 1 2 1 3 4 0 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 3 4 0 1 2 2 1 3 2 3 4 0 <td>а</td> <td></td> <td>481,655</td> <td>417,509</td> <td>63,285</td> <td>861</td>	а		481,655	417,509	63,285	861						
c Research & development 107,595 93,860 12,294 1,4 d Ministry projects 78,849 78,849 78,849 78,849 24,034 24,034 24,034 24,034 82,044 82,044 82,044 82,044 82,044 82,044 82,044 82,044 82,044 82,044 82,044 82,044 82,044 83,004,877 2,119,893 40,1	_		<u>'</u>		· ·	463						
e Bad debt 24,034 24,034 f All other expenses 82,044 82,044 25 Total functional expenses. Add lines 1 through 24f 10,164,927 8,004,877 2,119,893 40,1 26 Joint costs. Check here ► ☐ if following SOP 98-2 If following SOP 98-2 10,164,927	c	Research & development	107,595	93,860	12,294	1,441						
f All other expenses 82,044 82,044 25 Total functional expenses. Add lines 1 through 24f 10,164,927 8,004,877 2,119,893 40,1 26 Joint costs. Check here ▶ ☐ if following SOP 98-2	d	Ministry projects	78,849	78,849								
Total functional expenses. Add lines 1 through 24f 10,164,927 8,004,877 2,119,893 40,1 26 Joint costs. Check here ► ☐ if following SOP 98-2	e	Bad debt	24,034		24,034							
26 Joint costs. Check here ► Tif following SOP 98-2	f	All other expenses	82,044		82,044							
26 Joint costs. Check here ► ☐ If following SOP 98-2	25	Total functional expenses. Add lines 1 through 24f	10,164,927	8,004,877	2,119,893	40,157						
·	26	Joint costs. Check here ▶ ☐ If following SOP 98-2										
complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation		Complete this line only if the organization reported in column (B) joint costs from a combined educational										

Pa	rt X	Balance Sheet					<u> </u>
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			68,749	1	92,665
	2	Savings and temporary cash investments			2		
	3	Pledges and grants receivable, net			7,063	3	203,236
	4	Accounts receivable, net	3,227,175	4	3,674,417		
	5	Receivables from current and former officers, directors, trustees highest compensated employees. Complete Part II of					
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$ Complete Part II of					
		Schedule L		6			
Assets	7	Notes and loans receivable, net				7	
SS	8	Inventories for sale or use			6,136,734	8	6,028,111
⋖	9	Prepaid expenses and deferred charges			947,040	9	976,832
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	8,350,332			
	ь	Less accumulated depreciation	10b	3,969,471	3,640,022	10c	4,380,861
	11	Investments—publicly traded securities			11		
	12	Investments—other securities See Part IV, line 11		12			
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			611,894	15	732,382
	16	Total assets. Add lines 1 through 15 (must equal line 34)		14,638,677	16	16,088,504	
	17	Accounts payable and accrued expenses .	2,408,588	17	2,487,234		
	18	Grants payable		18			
	19	Deferred revenue		19			
_	20	Tax-exempt bond liabilities		20			
es es	21	Escrow or custodial account liability Complete Part IV of Schedule	eD.			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
7		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			5,136,979	23	4,900,862
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			495,094	25	573,272
	26	Total liabilities. Add lines 17 through 25			8,040,661	26	7,961,368
Fund Balances		Organizations that follow SFAS 117, check here ► ↓ and comp through 29, and lines 33 and 34.	lete li	nes 27			
ลม	27	Unrestricted net assets			5,982,747	27	7,370,294
9	28	Temporarily restricted net assets		165,269	28	306,842	
р	29	Permanently restricted net assets			450,000	29	450,000
Fil		Organizations that do not follow SFAS 117, check here 🕨 🦵 an	d com	plete			
ē		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fu	nds			32	
Net	33	Total net assets or fund balances			6,598,016	33	8,127,136
	34	Total liabilities and net assets/fund balances	14,638,677	34	16,088,504		

Part XI Financial Statements and Reporting

			Yes	No			
1	Accounting method used to prepare the Form 990						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo			
b	Were the organization's financial statements audited by an independent accountant?						
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						
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both						
	▼ Separate basis						
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		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	3b					

Form **990** (2009)

OMB No 1545-0047

SCHEDULE A

Name of the organization

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Good News Publishers

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.

Inspection **Employer identification number**

_									36-114398			
	rt I			olic Charity Stat						tructions		
he	organiz			foundation because					x)			
1		A churc	h, conventio	on of churches, or as:	sociation of d	churches s	ection 170(b)	(1)(A)(i).				
2	Г	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3	Г	A hospı	tal or a coop	erative hospital serv	vice organiza	ition descri	bed in sectio i	170(b)(1)	(A)(iii).			
4	Γ			organization operate y, and state	ed in conjunc	tion with a	hospital desc	rıbed ın sec i	tion 170(b)(1)(A)(iii). En	ter the	
5	Γ	An orga	nızatıon ope	rated for the benefit	of a college	or universit	y owned or op	perated by a	governmenta	l unıt descri	bed ın	
		section 170(b)(1)(A)(iv). (Complete Part II)										
6	Γ	A feder	al, state, or l	ocal government or	governmenta	ıl unıt desci	nbed in secti	on 170(b)(1)(A)(v).			
7	Γ	describ	ed in	t normally receives a \)(vi) (Complete Pa		part of its s	support from	a governme	ntal unit or fro	m the gener	al public	
8	Г			described in section)(vi) (Com	inlete Part II)				
9	, V			t normally receives					uitions memh	ershin fees	and aross	
_	,			ties related to its ex								
		•		ss investment incom	•	-			` ,			
			_	anization after June 3				•		ix) ii oiii bas		
10	Г			anized and operated	•			•	•			
11	<u>'</u>	-	_	•	•	•	•			carry out th	e nurnoses of	
••	,	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										
е	Γ	other th	-	x, I certify that the o on managers and oth	•		•		•	•	•	
f		If the o	rganization r his box	eceived a written de						I supporting	organization,	
g			ugust 17, 2 g persons?	006, has the organiz	ation accept	ed any gift	or contributio	n from any	of the			
				ectly or indirectly co	ntrols eithe	r alone or to	agether with r	ersons des	cribed in (ii)		Yes No	
				overning body of the	•				,	11g(i		
			-	r of a person describ	* *	_				11g(i		
			•	ed entity of a person	` '		hove?			11g(ii		
h				g information about t							/	
••				g mormation about t	по варропи	a organizati	011(0)					
	(i) Name suppor	e of (ii) (described on col (i) listed in				e ion in ted in	(v) Did you no organiza col (i) o	tify the tion in	n organization in (vii)			
(organiza			or IRC section	your gove docume		suppo	rt?	ın the U		support?	
				(see		1		T	1	T	_	
				ınstructions))	Yes	No	Yes	No	Yes	No		
											1	
						1			1	1	1	

Total

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	÷·/		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	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) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(I) I Otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	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						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Se	ction A. Public Support						
Cale	ndar 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")	177,089	1,145,146	2,065,956	95,241	432,426	3,915,85
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	12,312,838	13,342,181	15,212,163	20,904,831	21,680,426	83,452,43
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	12,489,927	14,487,327	17,278,119	21,000,072	22,112,852	87,368,29
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons	10,000		263,000	22,000	10,000	305,00
Ь	A mounts 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	3,006,760	5,691,990	6,423,461	9,547,869	7,927,065	32,597,14
c	Add lines 7a and 7b	3,016,760	5,691,990	6,686,461	9,569,869	7,937,065	32,902,14
8	Public Support (Subtract line 7 c from line 6)						54,466,15
Se	ction B. Total Support						
	ndar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	beginning in)						
9	A mounts from line 6	12,489,927	14,487,327	17,278,119	21,000,072	22,112,852	87,368,29
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	411,018	233,657	294,426	363,636	484,908	1,787,64
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	411,018	233,657	294,426	363,636	484,908	1,787,64
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	45,761	34,340	89,273	95,796	44,198	309,36
13	Total support (Add lines 9, 10c, 11 and 12)	12,946,706	14,755,324	17,661,818	21,459,504	22,641,958	89,465,31
14	First Five Years If the Form 990 is check this box and stop here	for the organization	on's first, second	, third, fourth, or f	fifth tax year as a	501(c)(3) organ	zation, ▶┌
Se	ction C. Computation of Pul						
15	Public Support Percentage for 200	9 (line 8 column (f) divided by line	13 column (f))		15	60 880 %
16	Public support percentage from 20	08 Schedule A, Pa	art III, line 15			16	64 200 %

15	60	880	%
16	64	200	%

Section D. Computation of Investment Income Percentage

Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))

Investment income percentage from 2008 Schedule A, Part III, line 17

17 2 000 % 18 2 240 %

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

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

Private 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

Schedule A (Form 990 or 990-EZ) 2009

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DLN: 93493097007121

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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.

Open to Public

ilai Nevellue Scivice	Attacii to Foriii 990. F See separate ilisti	ructions.	Zilopeedieli
lame of the organization ood News Publishers		En	nployer identification number
ood news rabiishers		36	5-1143987
	Donor Advised Funds or Other	Similar Funds	s or Accounts. Complete if the
organization answered "Yes" t	to Form 990, Part IV, line 6. (a) Donor advised fu	unda	(b) Funds and other accounts
Total number at end of year	(a) Donor advised to	illus	(b) I dilus and other accounts
Aggregate contributions to (during year)			
Aggregate contributions to (during year) Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and	d depart advisors up writing that the asset	s hold in donor ad	lyucad
funds are the organization's property, sul			☐ Yes ☐ No
Did the organization inform all grantees,	· · · · · · · · · · · · · · · · · · ·		
used only for charitable purposes and no- conferring impermissible private benefit	t for the benefit of the donor or donor advi	isor, or for any ot	her purpose Yes No
	Complete if the organization answe	red "Yes" to Fo	· · · · · · · · · · · · · · · · · · ·
Purpose(s) of conservation easements h			in so, rate iv, mie 71
Preservation of land for public use (e			orically importantly land area
Protection of natural habitat	☐ Prese	rvation of a certif	ied historic structure
Preservation of open space			
Complete lines 2a-2d if the organization	held a qualified conservation contributio	on in the form of a	conservation
easement on the last day of the tax year			
			Held at the End of the Year
Total number of conservation easements		2a	
Total acreage restricted by conservation		2ь	
Number of conservation easements on a	•		
Number of conservation easements inclu	ided in (c) acquired after 8/1 //06	2d	
Number of conservation easements modi	fied, transferred, released, extinguished,	or terminated by	the organization during
the taxable year ►			
Number of states where property subject	to conservation easement is located 🛌		
Does the organization have a written poli		pection, handling	
enforcement of the conservation easeme	nts it holds?		Yes No
Staff and volunteer hours devoted to mor	nitoring, inspecting and enforcing conserv	vation easements	during the year ►
A mount of expenses incurred in monitori	ng. inspecting, and enforcing conservatio	on easements dur	ıng the vear ►\$
Does each conservation easement repor			
170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?			☐ Yes ☐ No
In Part XIV, describe how the organization			
balance sheet, and include, if applicable, the organization's accounting for conserv		on's financial stat	ements that describes
	Collections of Art, Historical Tr	easures, or C	Other Similar Assets.
	answered "Yes" to Form 990, Part I\		
If the organization elected, as permitted			
art, historical treasures, or other similar provide, in Part XIV, the text of the footn			furtherance of public service,
b If the organization elected, as permitted			alance sheet works of art,
historical treasures, or other similar asse		or research in furt	herance of public service,
provide the following amounts relating to			
(i) Revenues included in Form 990, Part	VIII, line 1		► \$
(ii) Assets included in Form 990, Part X			- \$
If the organization received or held works following amounts required to be reported			ancıal gaın, provide the
Revenues included in Form 990, Part VII	II, line 1		► \$
•			

b Assets included in Form 990, Part X

3	Using the organization's accession and othe											micmaca)
-	items (check all that apply)		d	_	Loanor	- 0 / 0	hange prog	rame				
а	Public exhibition		u	<u>'</u>		exci	nange prog	Iaiiis				
Ь	Scholarly research		e	ı	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and expla	ın how	v they	further	the o	organızatıor	ı's ex	cempt purpos	e ın		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								nılar	Γ	Yes	Г No
Pai	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Comple	ete ıf	the o	organız	atıor			es" to Form	990),	·
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	ediary	force	ontributi	ons c	or other ass	sets	not	Г	Yes	☐ No
Ь	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ıng ta	ble		Г			A mou	ınt	
c	Beginning balance						ŀ	1c				
d	Additions during the year						<u> </u>	1d				
e	Distributions during the year						}	1e				
f	• ,						}	1f				
· -	Ending balance		- 242				L	11			V	
2a	Did the organization include an amount on Fo		e 217							ı	Yes	No
	If "Yes," explain the arrangement in Part XIV		222	o===	d "Vac	" +c '	Form 000	Da	+ T\/ line 44	<u> </u>		
Рa	rt V Endowment Funds. Complete	(a)Current Year		Were Prior Y					T IV, IINE II		\ Four Y	ears Back
la	Beginning of year balance	450,000	(-)		450,000	(0)	vo rears back	(4)	Timee rears bac		y . ou	Date Care
ь	Contributions	•										
c	Investment earnings or losses	10,116			10,790							
d	Grants or scholarships	,										
e	Other expenditures for facilities	10,116			10,790			+				
Ī	and programs	,			, <u> </u>							
f	Administrative expenses											
g	End of year balance	450,000			450,000							
2	Provide the estimated percentage of the yea	r end balance held a	as									
а	Board designated or quasi-endowment	%										
ь	Permanent endowment ► 100 000 % %											
С	Term endowment ► %											
3a	Are there endowment funds not in the posses	ssion of the organiza	atıon t	hat a	re held a	and a	dministere	d for	the			
	organization by	•									Yes	No
	(i) unrelated organizations			•						Ba(i)		Νο
	(ii) related organizations								🛚	a(ii)	<u> </u>	No
	If "Yes" to 3a(II), are the related organizatio							•		3b		
4	Describe in Part XIV the intended uses of th							4.0				
Par	t VI Investments—Land, Buildings	s, and Equipme	nt. S							1		
	Description of investment				Cost or o s (investm		(b)Cost or o basis (oth		(c) Accumula depreciatio		(d) Bo	ok value
1a	Land						72	7,700				727,700
b	Buildings						4,64	4,915	2,004	,142		2,640,773
c	Leasehold improvements											
d	Equipment						2,50	4,166	1,965	,329		538,837
						_		_		-		-
e	Other						47:	3,551				473,551

Part VII Investments—Other Securities. See (a) Description of security or category			d of valuation
(including name of security)	(b)Book value		f-year market value
Financial derivatives			
Closely-held equity interests Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		12	
Part VIII Investments—Program Related. See			d of valuation
(a) Description of investment type	(b) Book value		f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III (a) Descrip			(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
Part X Other Liabilities. See Form 990, Part X			
(a) Description of Liability			
1 (a) Description of Liability	(, line 25. (b) A mount		
Federal Income Taxes	(b) A mount		
Federal Income Taxes	(b) A mount		
Federal Income Taxes	(b) A mount		
Federal Income Taxes	(b) A mount		
Federal Income Taxes	(b) A mount		
Federal Income Taxes	(b) A mount		
Federal Income Taxes	(b) A mount		
Federal Income Taxes	(b) A mount		
Federal Income Taxes	(b) A mount		
Federal Income Taxes	(b) A mount		
Federal Income Taxes	(b) A mount		
Federal Income Taxes	(b) A mount		
Federal Income Taxes	(b) A mount		
Federal Income Taxes	(b) A mount		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	11,694,047
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	10,164,927
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,529,120
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	0
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,529,120
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	22,641,958
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	10,947,911
3	Subtract line 2e from line 1	3	11,694,047
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	11,694,047
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	21,112,838
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	10,947,911
3	Subtract line 2e from line 1	3	10,164,927
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	10,164,927
	* VIV Supplemental Information		

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

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part 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

Ident if ier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	Endowment consists of one fund. The fund is used to aid the distribution of Sir Robert Anderson's books for encouragement and edification of Christians.
Part X	Description of Uncertain Tax Positions Under FIN 48	On June 1, 2009, Good News adopted the new provisions of the Income Tax topic of the Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) These provisions clarify the accounting for uncertainty in tax positions and prescribe guidance related to the financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return. The tax benefit from an uncertain tax position is only recognized in the statements of financial position if the tax position is more likely than not to be sustained upon an examination, based on the technical merits of the position. Interest and penalties, if any, are included in expenses in the statements of activities. As of May 31, 2010, Good News had no uncertain tax positions that qualify for recognition or disclosure in the financial statements.
Part XII, Line 2d - Other Adjustments		Cost of goods sold \$9,399,009 Royalty expense \$1,548,902
Part XIII, Line 2d - Other Adjustments		Cost of goods sold \$9,399,009 Royalty expense \$1,548,902

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OMB No 1545-0047

2009

SCHEDULE F (Form 990)

Statement of Activities Outside the United States ► Complete if the organization answered "Yes" to Form 990,

Department of the Treasury Internal Revenue Service

Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Open to Public **Inspection**

	ne of the organization d News Publishers				Employer ide	entification number				
					36-114398					
Pa	"Yes" to Form 9			ide the United States	s. Complete if the orgai	nization answered				
1	For grantmakers. 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?									
For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States										
3	Activites per Region (U	se Schedule F-1	(Form 990) ıf adı	ditional space is needed)						
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region				
Euro	ppe	0	0	Grants to recipients		29,176				
	Ja .	0	0			29,176				

Totals ▶

Pa	Part IV,	line 15, for an		nizations or Entitions or Entit					
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			Europe	China Bible Project	29,176	Wire transfers			
2				sted above that are r ee or counsel has pro					1
3	•	•	_	ntities					
									E / Form 990\ 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of assistance cash grant disbursement of non-cash valuation recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

Identifier	ReturnReference	ın Part I, line 2, and any addıtıonal information. Explanation
Procedure for Monitoring Grants Outside the U S		Schedule F, Part I, Line 2 Good News Publishers communicates with the grant recipient in Europe to ensure that the granted funds are spent on the China Bible Project

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

DLN: 93493097007121 OMB No 1545-0047

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

Inspection

Name of the organization						Employer identifi	cation number
Good News Publishers						36-1143987	
Part I General Inform	nation on Grants	and Assistance				I	
 Does the organization mathe selection criteria used Describe in Part IV the or Part II Grants and Other Form 990, Part I 	d to award the grants rganization's procedu ner Assistance to	orassistance?	of grant funds in the U	Jnited States the United States		ganızatıon answered	Yes T
Part IV and Sche	edule I-1 (Form 99	0) if additional space	is needed				▶ ┌
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Kregel Publications 733 Wealthy St SE Grand Rapids, MI 49501	381749272	501(C)(3)	10,116				Distribution of books
Churches Helping Churches 1000 N Randall Rd Elgin, IL 60123	364218233	501(C)(3)	20,000				Haiti relief fund
2 Enter total number of sect 3 Enter total number of othe							

Part III	Grants and Other Assistance to Individuals in the United States.	Complete if the organization	answered "Yes"	' to Form 990,	Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.				

(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
2	5,000			
	recipients	recipients cash grant	recipients cash grant non-cash assistance	recipients cash grant non-cash assistance (book, FMV, appraisal, other)

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S		Schedule I, Part I, Line 2 Scholarships are for students of employees that have completed 24 months of continuous full-time employment School must be an accredited Christian college Maximum of \$1,250 per student, per semester Proof of enrollment required and student must be single and listed as a dependent on the employee's tax return Grant reporting is monitored through on-site field visits

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DLN: 93493097007121

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Goo	d News Publishers		36-1143987			
Pa	rt I Questions Regarding Compensation		30-1143987			
					Yes	Νo
1a	Check the appropriate box(es) if the organization provided a 990, Part VII, Section A, line 1a Complete Part III to pro-					
	First-class or charter travel	Housing allowance or residence for	personal use			
	Travel for companions	Payments for business use of perso				
	Tax idemnification and gross-up payments	Health or social club dues or initiati				
	Discretionary spending account	Personal services (e g , maid, chau	feur, chef)			
b	If any of the boxes in line 1a are checked, did the organizate reimbursement orprovision of all the expenses described a			1b		
2	Did the organization require substantiation prior to reimbur officers, directors, trustees, and the CEO/Executive Direct			2		
3	Indicate which, if any, of the following the organization uses organization's CEO/Executive Director Check all that apply Compensation committee Independent compensation consultant Form 990 of other organizations	ly Written employment contract				
4	During the year, did any person listed in Form 990, Part VI or a related organization	I, Section A, line 1a with respect to t	he filing organization			
а	Receive a severance payment or change-of-control payme	nt?		4a		Νo
b	Participate in, or receive payment from, a supplemental nor	nqualified retirement plan?		4b		Νo
c	Participate in, or receive payment from, an equity-based co	ompensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide t	he applicable amounts for each item i	n Part III			
5	Only 501(c)(3) and 501(c)(4) organizations only must com For persons listed in form 990, Part VII, Section A, line 1a compensation contingent on the revenues of		ny			
а	The organization?			5a		Νo
b	Any related organization?		ļ	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, line 1a compensation contingent on the net earnings of	, did the organization pay or accrue a	ny			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line 1a payments not described in lines 5 and 6? If "Yes," describe		n-fixed	7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or subject to the initial contract exception described in Regs in Part III	•		8		Νo
9	If "Yes" to line 8, did the organization also follow the rebutt	able presumption procedure describe	d in Regulations			

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI		(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benenes	(5)(1) (5)	Form 990 or Form 990-EZ
Lane T Dennis	(1) (11)	241,965 0	200 0		14,800 0	14,714 0	283,887 0	0
Geoffrey L Dennis	(1) (11)	126,496 0	8,950 0		7,383 0	5,382 0	150,693 0	o 0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Ret urn Ref erence	Explanation
	Part I, Line 7	Bonuses

Schedule J (Form 990) 2009

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Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

DLN: 93493097007121

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

Transactions with Interested Persons

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

Name of the organization Good News Publishers

36-1143987

Complete if the organizat	ion ans	wered "	Yes" on For	m 990, l	Part IV, line 25a o	or 25b,	or Form	990-EZ,	Part V , lın		
1 (a) Name of disq	ualıfıed	person			(b) Desc	ription	of trans	action		(c) Co	rrected?
-					(-,					Yes	No
										_	
2 Enter the amount of tax impos									r		
section 4958									· \$		
3 Enter the amount of tax, if any	, on line	2, abo	ve, reimburs	ed by th	ie organization .			🕨	· \$		
Part III Loans to and/or I	Erom	Intoro	stad Dare	5000							
Complete if the organiz). Part IV. line 26	. or For	m 990-	EZ. Part V	. line 38a		
					, . 4.12.27, 1111.0 2.0	, 5. 1 51	, , , , ,	(f)	, 504		
(a) Name of interested names and		oan to m the	/a\0 ===	unal		(e)		Approv		(g)Writte	
(a) Name of interested person and purpose	1	zation?	(c)Orig principal a		(d)Balance due	default?		by boar		agreemer	ıt?
Par. Poss			F					committ	1		
	То	From				Yes	No	Yes	No	Yes	No
				.							
Total				▶ \$							
Part III Grants or Assistar Complete if the orga						/ line	27				
Complete it the orga	IIIZauc				een interested per		27.				
(a) Name of interested pers	on	'			ganization	5011	(c) A n	nount of g	rant or typ	e of assis	tance
A ndrew Jahns		Sor	of a Senior		<u> </u>	-	Scholars	hips A mo	unt \$ 250	0	
								'			
Part IV Business Transact	ions i	Involv	ing Inter	ested	Persons.	<u>'</u>					
Complete if the orga						<u>, lıne</u>	28a, 28	b, or 28	c		
		(Ь) Relationsh	nip						(e) Sh	narıng of
(a) Name of interested person		1	ween interes		(c) A mount of	(d) Desc	ription of t	transactio	n I -	ızatıon's
			erson and th		transaction	`	_,			reve	nues?
		+	organization							Yes	No
Jessica Bush		Presid	lents Daugh	ter	17,5	OU Ar	t design				N o
											Νo
											Νο
											Νο
		1		I		ı				1	Lea

Presidents Son

Noah Dennis

14,905 Outside svc

Software ID: **Software Version:**

EIN: 36-1143987

Name: Good News Publishers

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As Filed Data -

DLN: 93493097007121

OMB No 1545-0047

Inspection

SCHEDULE 0 (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.

Name of the organization Good News Publishers

Employer identification number

36-1143987

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		Good New's employs a number of individuals from the Dennis family Lane Dennis is President and Board Member. The following are related to Lane. 1. Ebeth - wife, Sr VP and Board Member. 2. Geoff - son, Executive VP and Board Member. 3. Josh - son, VP of Design Svcs. 4. Jon - son, Board Member, non compensated. 5. Mike - son-in-law, Board Member, non compensated.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		Good New's Publishers' Form 990 is prepared by an independent certified public accounting firm. The Board of Directors and Audit Committee members have access to the Form 990 and review the return before it is filed.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12		Good New's has a conflict of interest policy in place and is currently working on a process that would require each officer, Board Member and Audit Committee member to sign a conflict of interest form each year. This will be completed and implemented for the next fiscal year.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, Ine 15		Good New's utilizes industry comparable data from multiple sources to recommend salary and bonus figures for managment. This information is then compiled, and recommendations for all officers, as well as a general percentage increase for all other employees, are submitted to the audit committee. The audit committee reviews, discusses, has the ability to change recommendations, and then approves the submission, which in turn is brought to the full board by way of recommendation of the audit committee. The full board then takes the recommendation, has further discussion if necessary, and then approves the recommendation from the audit committee. Audit committee members (and any family members on the board) who are also compensated officers are excused from the part of the meeting that would cover any discussion over compensation or bonuses, so they would have no say or vote in the matter. The decisions regarding compensation are then documented in the minutes.

ldentifier	Return Reference	Explanation	
Form 990, Part VI, Section C, line 19		The governing documents, conflict of interest policy, and financial statements are all available upon request	

ldentifier	Return Reference	Explanation
Form 990, Part XI, Line 2c		Good New's Publishers has an Audit Committee that assumes responsibility for oversight of the audit and is involved in the selection of an independent accounting firm. This process remains unchanged from the prior year.

Additional Data

Software ID: Software Version:

EIN: 36-1143987

Name: Good News Publishers

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 75,917 including grants of \$ 20,000) (Revenue \$ 134,702)

Publishing Christian literature for the purpose of spreading the gospel of Jesus Christ. This ministry is performed by the sales and distribution of other evangelistic materials such as audio books, videos, and calendar cards. Altogether, a little more than 200,000 of other evangelistic materials were distributed both domestically and internationally

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

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Shipping and Mailing	481,655	417,509	63,285	861
Miscellaneous	148,669	135,609	12,597	463
Research & development	107,595	93,860	12,294	1,441
Ministry projects	78,849	78,849		
Bad debt	24,034		24,034	