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**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

TEEA0113L 12/29/09

Form **990** (2009)

2009

					Under Se	except bla	(c), 527, or 49 ock lung bene	efit trust or p	ne internal Rev Private foundat	venue Co ion)	ae	1,52		4 3
	Dep	artment nal Reve	of the Treasury enue Service		► The organiz	ation may ha	ve to use a copy	of this return to	satisfy state repo	rting require	ments.	Оре	n to Public In	spection
		For th	ne 2009 calenda	ar year,	or tax year be	ginning	7/01	, :	2009, and endi	ng 6/	'30		, 2010	
	В	Check in	f applicable	lease use	С						D Employ	er Ident	ification Number	
		∐ Ad	Idress change	IRS label	Society	for th	e_Increa	se of th	e Ministr	У	06-	<u>6053</u>	077	
	′	Na	me change	or type. See	924 Farm West Har						E Telepho	one numi	ber	
		Ind	tial return	specific Instruc-	west nar	crora,	C1 0010	′			(86	0) 2	33-1732	
		Ter	rmination	tions.										
		$\vdash$	nended return		<u> </u>					,	G Gross r	•	<del></del>	
		Application pending F Name and address of principal officer.  Same As C Above H(b) Are all affiliates									• .		<b>#</b> ''"	=
	_						·	40474 \44			' attach a list		structions) Yes	∐ No
	<u> </u>		exempt status			)◀ (ınsert	no.)	4947(a)(1)	or 527	1			_	
	<u>K</u>		of organization	Corpora	inistry.	Associa	tion X Other		L Year of Forma		exemption no		egal domicile C7	<u> </u>
	Pã		Summar		ition     Frust	ASSOCIA	ition A Other	<u> </u>	L Year of Forma	ition. 103	/   W 3	tate of I	egal domicile C1	
		1	Briefly describe	the ord	anization's m	ission or r	nost significa	nt activities:	The Soci	ety fo	r the	Incr	ease of t	he
		_	Ministry .	(here	inafter '	"SIM")	is organ	ized as	a not-for	r-prof	it publ	lic i	foundation	<u></u>
	ä	_	SIM works	clos	ely_with	the Er	iscopal	seminar	ies and o	ther_e	ducation	n ai	nd traini	na
	ctivities & Governance	_	programs,	_as_w	ell_as_w:	ith_all	_bishops	_and_co	nmissions	on mi	nistry_	of t	the	
	è		Check this box								25% of its		<b>.</b>	1.0
2011	85		Number of votir Number of inde									3 4		$\frac{18}{18}$
	E		Total number of						•			5		4
හ හ	₹	6	Total number of	f volunte	eers (estimate	of necess	ary)					6		25
FEB	٩		Total gross unre						12		•	7a		0.
罡		1 d	Net unrelated b	usiness	taxable incor	ne from Fo	orm 990-T, lır	ne 34 .		<del></del>	<u> </u>	7b		0.
	İ									P	rior Year		Current Y	
SCANNED	9		Contributions a								434,9	20.	499	<u>,797.</u>
氢	Revenue		Program service nvestment inco					 N		· <del>                                      </del>	12,0	03	_17	, 305.
S	8		Other revenue (	-		• • •		•		· <del>                                      </del>		58.		,100.
Ø			Total revenue -								454,4			,592.
			Grants and simi								220,1			,100.
		14 E	Benefits paid to	or for r	nembers (Par	t IX, colun	nn (A), line 4	)						
	اه	<b>15</b> S	Salaries, other o	compen	sation, emplo	yee benef	its (Part IX, c	olumn (A), l	ines 5-10)		315,2	65.	220	,089.
	136	16a Professional fundraising fees (Part IX, column (A), line 11e)												
	Expenses	b T	otal fundraising	g expen	ses (Part IX,	column (D	), line 25) ►	_	84,641.					
	<b>"</b>	<b>17</b> C	Other expenses	(Part I)	K, column (A)	, lines 11a	- 1/1 <del>0, 11/1-24</del> /				130,0	07.	153	,641.
		<b>18</b> T	otal expenses.	Add lin	es 13-17 (mu:	st equal P	art IX, colum	inliant the b	5		665,3	92.	581	,830.
_		19 F	Revenue less ex	penses	. Subtract line	18 from	line_12		[Q]		-210,9	21.	-92	,238.
	8 8						ºº FE	B 08 20	11   9	Begir	ning of Y	ear	End of Ye	ear
	A a a		otal assets (Pa	-	•		<u> </u>		SS	. 3	3,254,5	54.	3,688	
	¥ E	<b>21</b> T	otal liabilities (	Part X,	line 26)		1		<b></b>		6,7	32.	7	<u>,201.</u>
F	Zű		let assets or fu			t line 21 fr	om line 202		<u> </u>	3	,247,8	22.	3,681	,329.
E	Par	ĠIJ.	Signature		77									<del></del>
			Under penalties of true, correct, and o	perjury, I complete	declare that I have Declaration of prej	e examined the parer (other the	iis return, includin nan officer) is bas	g accompanying ed on all informa	schedules and state ation of which prepa	tements, and arer has any l	to the best of knowledge	my kno	wledge and belief,	ıt ıs
,	Sigi	2	- 140	nall	LAB PET	И	_			13	7/1/20	//		
Ì	Her	e	Signature of o	fficer	West C					Da	(e /			
			Thomas	Moor	e III					Exect	ıtive D	)i rec	•	
_			Type or print r										<del>-</del>	
_					<u> </u>				Date	cı	neck if	Pre (se	eparer's identifying e instructions)	number
	Paid		Preparer's		$\widetilde{\mathcal{L}}$	7			1/18/	se en	elf- nployed			
_	Pre- pare	_	signature	***== =	<u> </u>	<u> </u>	CPA		1 '/''	′		P(	00971497	
	Use		Firm's name (or yours if self-	_			& MCNAB	LLC						
	Only		employed),  address, and		olcott H			<del></del>		EI			15530	
-			ZIP + 4		ersfield,					Pł	none no. 🟲	(860	529-336	
r	viay :	tne IKS	S discuss this r	eturn w	ith the prepar	er snown	apove? (see	instructions)					X Yes	No

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

		0033011	<del></del>	raye z
	Statement of Program Service Accomplishments			
1	Briefly describe the organization's mission			
	See Schedule O	. <b></b> .		
	Did the organization undertake any significant program services during the year which were not listed on the prior			
2		$\Box$	, <del>.</del>	A1 -
	Form 990 or 990-EZ? .	י 🗀 י	res X	No
	If 'Yes,' describe these new services on Schedule O.	_		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	1	res X	No
	If 'Yes,' describe these changes on Schedule O.	_	_	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by exper	ses Secti	on 501(c)	(3)
-	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocation	ns to othe	rs, the to	al
	expenses, and revenue, if any, for each program service reported.			
48	a (Code:) (Expenses \$ 348,230. including grants of \$) (Revenue			)
	Scholarships: Grants to seminarians. The Foundation's charitable purpose	<u>is_to</u>	<u>grant</u>	
	scholarships to seminary students. Seventy-six seminarians received gra	nts to	taling	
	\$208,100 and other related expenses of \$140,130.			
			- <b>-</b>	
46	(Code: 100 (Expenses \$ 32,474. including grants of \$ ) (Revenue	Ś		)
	Advocacy: Supporting seminarians in the councils of the Church.			
	Advocacy. Supporting Seminarians in the councils of the church.			
	(Code: 100 ) (Everyon 6 20 764 )	ć		,
	(Code:) (Expenses \$) (Revenue) (Revenue)			,
	<u>Pastoral: Daily prayers and semi-annual visits and consultations with S</u>	ım_grai	1 <u>c</u> – – –	
	recipients.			
			<b></b>	
<u> </u>	Other program services. (Describe in Schedule O.)	_		
70	(Expenses \$ including grants of \$ ) (Revenue \$		1	
4 -				
40	Total program service expenses ► 410, 468.			

			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	х	
2		2	X	
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 L	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		Х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8_		х
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		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? It is complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
(	• Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI			
•	• Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII			
•	• Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII			
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX			
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII.	12	х	
	AWas the organization included in consolidated, independent audited financial statement for the tax  Yes No			
	year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional	12		v
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13 14a		<u>X</u>
	Did the organization maintain an office, employees, or agents outside of the officed States:  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	14a		<u>^</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
16	or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15	_	<u>X</u>
	Individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16	-	<u>X</u>
	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	-	X
	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		X
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		х
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H.	20		<u>X</u>

Form **990** (2009) Society for the Increase of the Ministry 06-6053077 Partily Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 X Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX. column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III. 22 X Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J 23 Х . .. .. ... . . . 24a Х 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..... Х 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete X 25b Schedule L, Part I. . 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 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete 27 Х 28 Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV 28b Х c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV. X 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N. Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 Х 33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R,

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Х

X

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treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI ....

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is

<u> </u>	and tax compliance			
	1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		Yes	No
	<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable <b>1b</b> 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	X	
:	2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
:	2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	1.8		
•	3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		х
	<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b		
4	4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
	<b>b</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.			
Ē	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	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?	5с		
e	To 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?	6a		Χ <sup>β</sup>
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).			?
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7Ь		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year			
	e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7</b> f		X
	g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? .	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9				
	a Did the organization make any taxable distributions under section 4966?	9a		
	b Did the organization make any distribution to a donor, donor advisor, or related person?	9Ь		
	Section 501(c)(7) organizations. Enter:			÷
	a Initiation fees and capital contributions included on Part VIII, line 12			
	b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from other 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.)			
2	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?.	12a		
	h if 'Yos' order the amount of tay exempt interest received or accrued during the year			1.

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

<u>Se</u>	ction A. Governing Body and Management			
			Yes	No
1	a Enter the number of voting members of the governing body			
	b Enter the number of voting members that are independent			37 47
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its organizational documents	4		Х
	since the prior Form 990 was filed?			<u> </u>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		Х
7	a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		х
	<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	,		
	a The governing body?	8a	Х	
	<b>b</b> Each committee with authority to act on behalf of the governing body?	8b		Х
	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		х
	ction B. Policies (This Section B requests information about policies not required by the Internal			
	enue Code.)			
, , , ,	5100 55007		Yes	No
10	a Does the organization have local chapters, branches, or affiliates?	10a		X
	b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10Ь		
	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		Х
	ADescribe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O			
	a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х	
	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12Ь		Х
(	C Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12c		x
	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		í	
	a The organization's CEO, Executive Director, or top management official.	15a		X
	Other officers of key employees of the organization	15b		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16	a 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		Х
ı	olf '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	,	
Sec	tion C. Disclosures			
17	List the states with which a copy of this Form 990 is required to be filed ► None	. <b>_</b>		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) at inspection. Indicate how you make these available. Check all that apply.  Own website  Another's website  X Upon request	/ailabl	e for p	oilduc
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest pol statements available to the public See Schedule O	icy, an	d fina	ncıal
	State the name, physical address, and telephone number of the person who possesses the books and records of the organization and telephone number of the person who possesses the books and records of the organization and telephone number of the person who possesses the books and records of the organization and telephone number of the person who possesses the books and records of the organization and telephone number of the person who possesses the books and records of the organization and telephone number of the person who possesses the books and records of the organization and telephone number of the person who possesses the books and records of the organization and telephone number of the person who possesses the books and records of the organization and telephone number of the person who possesses the books and records of the organization and telephone number of the person who possesses the books and records of the organization and telephone number of the person who possesses the books and records of the organization and telephone number of the person who possesses the books and records of the organization and telephone number of the person who possesses the books and records of the person who possesses the books are the person of the perso		on:	

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

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

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

(A)	(B)	(c)						(D)	(E)	(F)	
Name and Title	Average hours		_	tion (check all that ap				Reportable compensation from	Reportable compensation from	Estimated amount of other	
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations -(W-2/1099-MISC)	compensation from the organization and related organizations	
Dr. Marnie Mueller											
Director	2	X						0.	0.	0.	
The Rev. Salin Low											
Treasurer	2	X						0.	0.	0.	
Winthrop W Goodwin											
Secretary	2	Х						0.	0.	0.	
Judith C Radasch											
Vice Chair	2	Х						0.	0.	O.	
The Rev. John L. C. Mitman								····			
Ex Chf Develop	40	Х						58,267.	0.	O.	
Richard Wenner									~		
Asst. Treasurer	2.	X					i	0.	· . 0.	0.	
The Rev Dr Richard F Tomba									•		
Chairman	2	Х						0.	0.	0.	
The Rev Amy Fallon			1	J				. –	,		
Ex-Schol Chair	2	X						0.	Ò.	0.	
The Very Rev Martha J Horn					ĺ						
Director	2	Х	l					0.	0.	. 0.	
Rev Canon Charles K Robert						ĺ					
Director	2	Х						0.	· 0.	0.	
The Rev James B Lemler				Į							
Director	2	Х						0.	0.	0.	
The Rev Ernestein C Flemis			ļ		Ì		ľ				
Director	2	Х		$\perp$	_			0.	0.	0.	
Ms Joyce Phillips Austin			ļ		i		İ				
Director	2	_ X	$\sqcup$	$\perp$				0.	0.	0.	
Margherita Cunningham			ļ		l						
Director	2	X	┙					0.	0.	0.	
The Rev Canon Angela S Ifi		Ī	- 1	- 1		- 1	ı				
Director	2	Х			$\perp$		_	0.	0.	0.	
Mrs Katherine B Metcalf				ļ			- [				
Director	2	X	_ļ					0.	0.	0.	
Mr William Dunakin									1		
Director	2	Х	$\perp$					0.]	0.	<u> </u>	
RAA		71	FΔN	1071	11/	LOMO.				Form 997 (2009)	

Rankvill Section A. Officers, Directors, Trus	tees, k	⟨еу	En	nplo	oye	es,	an	d Highest Cor	npensated Em	ployees (cont.)
(A)	(B)			-	c)			(D)	(E)	(F)
Name and Title	Average hours		_	_	_			Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	or div	Institutional trus	Officer	Key employee	Highest co	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the
		ndividual trustee or director	ğ	4	Į ĝ	est c		(	(	organization and related
		ا ا			oye	compensated ee				organizations
		8	uste		"	l ®				
	i		ă			Ē	l			
Mh a Da Day Vaith Maitean		├			┢	⊢	⊢			<del> </del>
The Rt Rev Keith Whitmore	١ ۾	l,			Ì					
Director Cabb	2	X	$\vdash$			⊢	_	0.	0	. 0.
Rev David Cobb	١	l.				1		١ ,	_	_
Schlrshp Chair Thomas Moore III	2	X			├	├	_	0.	0	. 0.
Executive Direc	40	<b>l</b> ,		X				125 000	0.	. o.
Executive bilec	40			<b> </b> ^	$\vdash$		<u> </u>	125,000.	U.	· · · · · · · · · · · · · · · · · · ·
										<u> </u>
		-				<del> </del>	_			<u> </u>
								i		
		$\vdash$	-							
	:									
		Н				-				1
										· · · · · · · · · · · · · · · · · · ·
		П								1
			ı							
1 b Total							▶	183,267.	0.	<u> </u>
2 Total number of individuals (including but not limited	I to thos	se lis	sted	abo	ve)	who	rec	ceived more than	\$100,000 in report	table compensation
from the organization   1										<del></del>
										Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in	or truste	ee, k	еу е	emp	loye	e, c	r hi	ghest compensate	ed employee	
										. 3 X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater the	ortable an \$150	con n nn	າper ດາ /	nsati If 'Ye	ion es' (	and Com	othe olete	er compensation t e Schedule J for s	trom such	
individual		0,00								. 4 X
5 Did any person listed on line 1a receive or accrue co	mpens	atıor	ı fro	m a	nv ı	ınre	late	d organization for	services	
rendered to the organization? If 'Yes,' complete Sch	edule J	for	suct	h pe	rśoi	7			· · · · · · · · · · · · · · · · · · ·	. 5 X
Section B. Independent Contractors									<u> </u>	<del></del>
<ol> <li>Complete this table for your five highest compensate compensation from the organization.</li> </ol>	ea inaep	ena	ent	соп	trac	tors	tna	t received more ti	1an \$100,000 of	
(A)								(B)	·	(C)
(A) Name and business address  (B) Description of Services Compensation										
							_	. <u> </u>		
				-				-		
<del></del>							ᆜ		<u> </u>	
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	<u> </u>									

Part IX: Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must com	ipiete column (A) but are	<u></u>		<del></del>
Do 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	208,100.	208,100.		
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	125,000.	62,500.	25,000.	37,500.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	42,401.	29,678.	11,193.	1,530.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	14,005.	7,455.	3,277.	3,273.
9	Other employee benefits	27,027.	14,387.	6,324.	6,316.
10	Payroll taxes	11,656.	6,205.	2,727.	2,724.
11	Fees for services (non-employees)				
ā	a Management				
ŧ	Legal				
(	Accounting				
c	Lobbying				
•	Prof fundraising svcs. See Part IV, In 17				
f	Investment management fees	14,977.	7,945.	4,056.	2,976.
ç	Other	55,492.	26,034.	16,560.	12,898.
12	Advertising and promotion .				
13	Office expenses	3,399.	1,809.	796.	794.
14	Information technology				
15	Royalties .				<u> </u>
16	Occupancy	12,434.	6,619.	2,909.	2,906.
	Travel .	21,361.	11,370.	4,998.	4,993.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,642.	3,536.	1,554.	1,552.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	1,912.	1,015.	518.	379.
23	Insurance	3,920.	2,087.	917.	916.
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.)	į			
а	Communication & marketing	19,274.	14,153.	2,562.	2,559.
	Telephone	5,286.	2,814.	1,237.	1,235.
	Postage and Shipping	3,794.	2,019.	888.	887.
d	Equipment rental & maintenance	3,146.	1,675.	736.	<u>735.</u>
	Printing and Publications	1,550.	825.	363.	362.
	All other expenses	454.	242.	106.	106.
	Total functional expenses. Add lines 1 through 24f	581,830.	410,468.	86,721.	84,641.
	Joint costs. Check here Lift 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				
BAA	- management of the state of th	<u> </u>			Form <b>990</b> (2009)

Pärt	X Balance Sheet				<del></del>	
				(A) Beginning of year		(B) End of year
	1 Cash – non-interest-bearing			<del></del>	1	
- [	2 Savings and temporary cash investments			20,470.	2	65,344
	3 Pledges and grants receivable, net	132,290.	3	232,654		
	4 Accounts receivable, net			4		
	5 Receivables from current and former officers, directors and highest compensated employees. Complete Part I	s, trustees, II of Sched	, key employees, lule L		5	
	6 Receivables from other disqualified persons (as define	ed under se	ection 4958(f)(1))			<b>建筑</b>
	and persons described in section 4958(c)(3)(B). Comp	lete Part I	I of Schedule L		6	
A S E T	7 Notes and loans receivable, net				7	
S   E	8 Inventories for sale or use		[		8	
T	9 Prepaid expenses and deferred charges			18,904.	9	17,453
1	Da Land, buildings, and equipment: cost or other basis.	10a	29,893.		14.3	
	Complete Part VI of Schedule D					
		10Ь	28,536.	3,269.	10 c	1,357
1	•		.,	3,079,621.	11	3,371,722
1	•				12	
1			- F		13	
1					14	
1 1			ſ		15	-
10	·			3,254,554.	16	3,688,530
1:				6,732.	17	7,201
1 18			18			
19	· ·		19			
20			•	20		
2					21	
2				meen to		
	of Schedule L		' [		22	
2	• • • • • • • • • • • • • • • • • • • •	ird parties	[		23	
24		-	T .		24	
25		-			25	
26	•			6,732.		7,201
+=	Organizations that follow SFAS 117, check here ▶					
	27 through 29 and lines 33 and 34.					
27	Unrestricted net assets			3,098,659.	27	3,508,073.
28	Temporarily restricted net assets		[	128,575.	28	152,668.
29	Permanently restricted net assets		[	20,588.	29	20,588.
	Organizations that do not follow SFAS 117, check her	re ► 🗌	and complete			
	lines 30 through 34.					
30				30		
31	Paid-in or capital surplus, or land, building, and equipr		r		31	
32			-		32	
33				3,247,822.	33	3,681,329.
34			i-	3,254,554.	34	3,688,530.

BAA

Form 990 (2009)

			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
22	Were the organization's financial statements compiled or reviewed by an independent accountant?.	2a		<u> </u>
Ł	Were the organization's financial statements audited by an independent accountant?	2Ь	X	L
•	: If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		15	
C	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:			1
	X Separate basis Consolidated basis Both consolidated and separate basis			
3 a	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		х
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		

BAA

Form 990 (2009)

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

# **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.

2009

(\*Open to Public =

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

			ncrease of th							<u>05307 </u>			
Par	Rea	son for Pu	ublic Charity Stat	us (All organizations	must	comple	ete this	part.	) See i	nstruct	ions		
The c	organizatio	on is not a pi	rivate foundation beca	use it is: (For lines 1 thro	ough 11,	check o	only one	box.)					
1	A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).												
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)  A hospital or connegative hospital service organization described in section 170(b)(1)(A)(ii)												
3	A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii).												
4													
•	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(bX1)(AXv).												
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	= · · · · · · · · · · · · · · · · · · ·												
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 or	ganization o	rganized and operated	d exclusively to test for pr	ublic saf	ety. See	section	1 509(a)	(4).				
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See <b>section 509(a)(3)</b> . Check the box that describes the type of supporting organization and complete lines 11e through 11h.												
		Type I	<b>b</b> ∐Type Ⅱ			•				d 📙	Type III-		
e	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													
g	Since	August 17, 2	2006, has the organiz	ation accepted any gift o	or contrib	oution fr	om any	of the f	ollowing	persons	i? 	V	- N-
	<b>(i)</b>	a person who	o directly or indirectly	controls, either alone or supported organization?	togethe	with pe	rsons d	escribe	d in (ii) a	and (iii)	11 g (i)	Yes	No
				cribed in (i) above?						•			
		-	•	**				• •	• • • • • • • • • • • • • • • • • • • •		11 g (ii)		
L				n described in (i) or (ii) a			•	• • • •	• • • • • • • • • • • • • • • • • • • •	• • • •	11 g (iii)		
<u>h</u>				the supported organization	1				T				
	(I) Name o Orgai	f Supported nization	(ii) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat	Is the tion in cold in your times the times th	(v) Did y the organ col i your su	ızatıon in (i) of	(vi) I organizati (i) organi U.S	on in col	(vii) Amoun	t of Sup	port
					Yes	No	Yes	No	Yes	No			
					<u>L.</u>	<u> </u>			L l	]			
					1								
					<u> </u>				·	1			
otal					5	F-1			7.				<del></del>
<u> </u>		<del> </del>				****	A						

Schedule A (Form 990 or 990-EZ) 2009 Society for the Increase of the Ministry 06-6053077

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

	(Complete only if you check	ed the box on line	e 5, 7, or 8 of Part	t1)					
Sec	tion A. Public Support	··········	<del>,</del>		т				
beg	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9	(f) Total	
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')			<del></del>					
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf								
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public 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).								
	Public support. Subtract line 5 from line 4	,		<del>-</del>			ر.		
Sec	tion B. Total Support				·	<del>r</del>		<del> </del>	
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9	(f) Total	
7	Amounts from line 4								
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources								
9	Net income from unrelated business activities, whether or not the business is regularly carried on								
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)								
11	Total support. Add lines 7 through 10	-							
12	Gross receipts from related activ	ities, etc. (see ins	structions)				12		
	First five years. If the Form 990 organization, check this box and	stop here		id, third, fourth,	or fifth tax year a	s a section 5	501(c)(	(3) ▶ □	
Sec	tion C. Computation of Pub	olic Support P	ercentage			<u></u> 1		. <u>.</u>	
14	Public support percentage for 20	09 (line 6, columi	n (f) divided by lin	e 11, column (f).			14	<u> </u>	
	Public support percentage from 2							<u> </u>	
	33-1/3 support test — 2009. If the and stop here. The organization	qualifies as a put	olicly supported or	ganızatıon					
b	<b>33-1/3 support test — 2008.</b> If the and <b>stop here.</b> The organization	e organization did qualifies as a pub	not check a box of plicly supported or	on line 13, or 16 ganization.	a, and line 15 is 3	3-1/3% or m	ore, c	heck this box	
17a	7a 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 organiz	ation did not che	ck a box on line,	13, 16a, 16b, 17				structions	

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

36	ction A. Public Support						
Cale	endar year (or fiscal yr beginning in)►	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.').	312,481.	305,125.	200,138.	434,920.	499,797.	1,752,461.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity	, , , , , , , , , , , , , , , , , , ,	000,220		1017 200		2, 102, 102.
	that is related to the organization's tax-exempt purpose						0.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6	Total. Add lines 1 through 5.	312,481.	305,125.	200,138.	434,920.	499,797.	1,752,461.
78	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
l	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of		0.			· · ·	<u> </u>
	the amount on line 13 for the year	0.	0.	0.	0.	0.1	0.
	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8	Public support (Subtract line						
	7c from line 6.)						1,752,461.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
9	Amounts from line 6	312,481.	305,125.	200,138.	434,920.	499,797.	1,752,461.
					-		-
102	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	112 607	100 000	147 710	140 500	105 105	, , , , , , , , , , , , , , , , , , ,
	dividends, payments received on securities loans, rents, royalties and income form similar sources	113,697.	120,933.	147,710.	149,589.	105,105.	637,034.
b	dividends, payments received on securities loans, rents, royalties and income form similar sources  Unrelated business taxable income (less section 511	113,697. 113,697.	120,933.	147,710.	149,589. 149,589.	105,105. 105,105.	637, 034. 0. 637, 034.
t.	dividends, payments received on securities loans, rents, royalties and income form similar sources			•			0. 637,034.
t 11	dividends, payments received on securities loans, rents, royalties and income form similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b  Net income from unrelated business activities not included inline 10b, whether or not the business is			•			0. 637,034. 0. 42,346.
11 12	dividends, payments received on securities loans, rents, royalties and income form similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). See Part IV.	9,581.	9,337.	8,870.	149,589. 7,458.	105,105. 7,100.	0. 637,034. 0. 42,346. 2,431,841.
11 12	dividends, payments received on securities loans, rents, royalties and income form similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). See Part IV.	9,581.	9,337.	8,870.	149,589. 7,458.	105,105. 7,100.	0. 637,034. 0. 42,346. 2,431,841.
11 12 13 14	dividends, payments received on securities loans, rents, royalties and income form similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). See Part IV.  Total support. (add liss 9, 10c, 11, and 12.)  First five years. If the Form 990 organization, check this box and	9,581.	9,337.	8,870.	149,589. 7,458.	105,105. 7,100.	0. 637,034. 0. 42,346. 2,431,841.
11 12 13 14 Sec	dividends, payments received on securities loans, rents, royalties and income form similar sources	9,581. s for the organiza stop here	9,337.	8,870.	7,458.	7,100.	0. 637,034. 0. 42,346. 2,431,841. (3) ► □
11 12 13 14 Sec 15	dividends, payments received on securities loans, rents, royalties and income form similar sources	9,581.  s for the organiza stop here	9,337. tion's first, second	8,870. d, third, fourth, o	7,458.	7,100.	0. 637,034. 0. 42,346. 2,431,841. (3) ► □
11 12 13 14 Sec 15 16	dividends, payments received on securities loans, rents, royalties and income form similar sources	9,581. s for the organiza stop here plic Support Poolic Support S	9, 337. tion's first, second	8,870. d, third, fourth, o	7,458.	7,100. a section 501(c)	0. 637,034. 0. 42,346. 2,431,841. (3) ► □
11 12 13 14 Sec: 15 16 Sec:	dividends, payments received on securities loans, rents, royalties and income form similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). See Part .IV.  Total support. (add ins 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage for 20 Public support percentage from 2 tion D. Computation of Invettion	9,581.  s for the organiza stop here	9,337. tion's first, secondercentage (f) divided by line Part III, line 15.	8,870. d, third, fourth, o	7,458.	7,100. a section 501(c)	0. 637,034. 0. 42,346. 2,431,841. (3) 72.1% 73.2%
11 12 13 14 Sec 15 16 Sec	dividends, payments received on securities loans, rents, royalties and income form similar sources	9,581.  s for the organiza stop here  plic Support Pool (line 8, column 2008 Schedule A, estment Incom or 2009 (line 10c, or	9,337.  tion's first, second ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided	8,870. d, third, fourth, o	7, 458.	7,100. a section 501(c)	0. 637,034. 0. 42,346. 2,431,841. (3) ► □
11 12 13 14 Sec 15 16 Sec 17 18	dividends, payments received on securities loans, rents, royalties and income form similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). See Part IV.  Total support. (add ins 9, 10c, 11, and 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Put Public support percentage from 2 tion D. Computation of Investment income percentage for 13-1/3 support tests – 2009. If the o	9,581.  9,581.  s for the organizatop here  colic Support Perecent of the second o	9,337.  tion's first, second ercentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line 1 check the box on line	8,870.  d, third, fourth, o  13, column (f))  by line 13, column  7	7, 458.	7,100.  7,100.  a section 501(c)  15  16  17  18  6, and line 17 is no	0. 637,034. 0. 42,346. 2,431,841. (3) 72.1% 73.2% 26.2% 24.9%
11 12 13 14 Sec 15 16 Sec 17 18 19a	dividends, payments received on securities loans, rents, royalties and income form similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). See Part. IV.  Total support. (add ins 9, 10c, 11, and 12.)  First five years. If the Form 990 in organization, check this box and tion C. Computation of Public support percentage from 2 tion D. Computation of Investment income percentage from 33-1/3 support tests — 2009. If the owner than 33-1/3%, check this bots 33-1/3 support tests — 2008. If the	9,581.  9,581.  s for the organization here.  9,581.  stop here.  9,008 Schedule A,  estment Incomor 2009 (line 10c, om 2008 Schedule rganization did not obx and stop here.  e organization did not obx and stop here.	9,337.  tion's first, second ercentage (f) divided by line Part III, line 15. ne Percentage column (f) divided e A, Part III, line 1 check the box on line The organization I not check a box	8,870.  d, third, fourth, o  13, column (f))  by line 13, column  7  ne 14, and line 15 is qualifies as a put on line 14 or 19a	7, 458. 7, 458. r fifth tax year as	7,100.  7,100.  a section 501(c)  15  16  17  18  4, and line 17 is no rganization	0. 637,034.  0. 42,346. 2,431,841.  (3) 72.1% 73.2%  26.2% 24.9%  xt
11 12 13 14 Sec 15 16 Sec 17 18 19a	dividends, payments received on securities loans, rents, royalties and income form similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). See Part IV.  Total support. (add ins 9, 10c, 11, and 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from 2 tion D. Computation of Investment income percentage for 33-1/3 support tests — 2009. If the omore than 33-1/3%, check this box and than 33-1/3%, check this box and than 33-1/3%, check this box more than 33-1/3%, check this box more than 33-1/3%, check this box and the second support tests — 2009. If the omore than 33-1/3%, check this box and the second support tests — 2009. If the omore than 33-1/3%, check this box and the second support tests — 2009. If the omore than 33-1/3%, check this box	9,581.  9,581.  s for the organizatop here.  plic Support Po  9 (line 8, column  2008 Schedule A,  estment Incom  or 2009 (line 10c, on  a 2008 Schedule  rganization did not on  ox and stop here.  e organization did  this box and stop	9,337.  tion's first, second ercentage (f) divided by line Part III, line 15. ne Percentage column (f) divided e A, Part III, line 1 check the box on line The organization I not check a box here. The organiz	8,870.  d, third, fourth, o  e 13, column (f))  by line 13, column  7.  ne 14, and line 15 is qualifies as a put on line 14 or 19a zation qualifies as	7,458.  7,458.  r fifth tax year as  nn (f))  more than 33-1/39  licly supported o  and line 16 is m  a publicly suppo	7,100.  7,100.  a section 501(c)  15  16  17  18  4, and line 17 is no rganization  ore than 33-1/3% rted organization	0. 637,034.  0. 42,346. 2,431,841.  (3) 72.1% 73.2%  26.2% 24.9%  t

Schedule A	(Form 990 c	r 990-EZ)	2009	Societ	y for	the	Inc	rease	of	the	Minis	try	06-60	53077		Page 4
Part IV	Suppleme Part II, lin	ental Info	rmatic	on. Com	plete t	his pa	rt to p	orovide	the	expl	anation	s requ	uired by	Part II,	line 10	;
-	r art II, IIII		170, 6	inu ran	. 111, 1111	6 12.	FIOVI	de aliy	Othe	au	unionai	IIIOII	nation.	See ilisi	ruction	5.
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# Schedule A, Part IV - Supplemental Information

Page 5

**Society for the Increase of the Ministry** 

06-6053077

Nature and Source	2009	2008	2007	2006	2005
Sarah Pardee Trust	7,100.	7,458.	8,870.	9,337.	9,581.
Total	\$ 7,100.	\$ 7,458.	\$ 8,870.	9,337. \$	9,581.

### SCHEDULE D (Form 990)

**Supplemental Financial Statements** 

► Complete if the organization answered 'Yes,' to Form 990, Part IV, fines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions OMB No 1545-0047
2009
Open to Public Linspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer Identification number

Sc	ociety for the Increase of the	Ministry			6 6053077	
<del></del>					6-6053077	
P	<b>Organizations Maintaining Dono</b> the organization answered 'Yes' to	r <b>Advised Funds or Oth</b> o o Form 990, Part IV, line	er Similar Funds e 6.	or Accou	ınts Complete	; if
_		(a) Donor advised	funds	<b>(b)</b> Fun	nds and other acc	ounts
1	Total number at end of year			, , , , , , , , , , , , , , , , , , , ,		
2						
3						
2			<del></del>			
_						
5	funds are the organization's property, subject	to the organization's exclusive	e legal control?		. Yes	No
6	5 Did the organization inform all grantees, dono used only for charitable purposes and not for t purpose conferring impermissible private bene	rs, and donor advisors in writithe benefit of the donor or don fit??	ng that grant funds n nor advisor or for any	nay be other	. TYes	□No
Pá	Till Conservation Easements Comple					7
	Purpose(s) of conservation easements held by			01111 330	, raitiv, iiio	<del></del>
'	Preservation of land for public use (e.g., re	- · · · · ·	Preservation of a	n historically	v important land	aroa
	<b>H</b>	ecreation of pleasure)	Preservation of ce	•	•	alea
	Protection of natural habitat		Freservation of Ce	eruneu msto	one structure	
_	Preservation of open space	an bald a suelified concentration		4		
2	Complete lines 2a through 2d if the organization last day of the tax year.	on neid a qualified conservation	on contribution in the	torm of a c	conservation ease	ment on the
	,	· ·		Н	leld at the End of	the Year
	a Total number of conservation easements			2a	-	
	b Total acreage restricted by conservation easer		<b>F</b>	2b		
	c Number of conservation easements on a certif		,	2c		
	d Number of conservation easements included in			2d		
	Number of conservation easements modified,		-		nization during th	ne tax
•	year ►	and of the state o	Silva, or terminated i	by the organ	inzation dailing th	io tax
4	Number of states where property subject to co	nservation easement is locate	:d ▶			
5	Does the organization have a written policy req and enforcement of the conservation easemen	garding the periodic monitoring	g, inspection, handlir	ng of violation	ons, Yes	□No
6	Staff and volunteer hours devoted to monitorin during the year	g, inspecting, and enforcing o	onservation easeme	nts	[_] 100	□•
7	Amount of expenses incurred in monitoring, induring the year	specting, and enforcing conse	rvation easements	\$		_
Ω	Does each conservation easement reported on	line 2(d) above satisfy the re	quirements of section			_
Ü	170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?				🗌 Yes	☐ No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote to conservation easements.	conservation easements in its root the organization's financial s	evenue and expense s statements that desc	statement, ar ribes the or	nd balance sheet, ganization's acco	and ounting for
Ŗā	Organizations Maintaining Collection Complete if the organization answ	ctions of Art, Historical vered 'Yes' to Form 990,	Treasures, or Ot Part IV, line 8.	her Simil	ar Assets	
1:	a If the organization elected, as permitted under treasures, or other similar assets held for publi the text of the footnote to its financial statemen	c exhibition, education, or res	search in furtherance	and balance of public se	e sheet works of ervice, provide, in	art, historical n Part XIV,
l	b If the organization elected, as permitted under treasures, or other similar assets held for publi amounts relating to these items:	SFAS 116, to report in its rev c exhibition, education, or res	enue statement and earch in furtherance	balance sho of public se	eet works of art, ervice, provide th	historical e following
	(i) Revenues included in Form 990, Part VIII,					
	(ii) Assets included in Form 990, Part X				►\$	
2	If the organization received or held works of ar amounts required to be reported under SFAS 1	t, historical treasures, or othe	r similar assets for fi	nancıal gair	n, provide the following	lowing
á	Revenues included in Form 990, Part VIII, line	1			▶\$	
	Assets included in Form 990 Part X				. ►\$	

Schedule D (Form 990) 2009 Socie						
Rantilli: Organizations Mainta	ining Colle	ctions of Art, His	storical Treasures,	or Other Similar As	sets (continued)	
3 Using the organization's acquisition items (check all that apply):	on accession	and other records, c	heck any of the follows	ng that are a significant u	se of its collection	
a Public exhibition			in or exchange progran			
b Scholarly research		e Oth	er			
c Preservation for future gener	ations	_				
4 Provide a description of the orga Part XIV.	nızatıon's coll	ections and explain I	now they further the org	ganization's exempt purpo	ose in	
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or ather than to	receive donations of be maintained as pa	art, historical treasures rt of the organization's	s, or other similar collection?	Yes No	<u> </u>
Partive Escrow and Custodia 9, or reported an amo	i Arrangem unt on Forn	ents Complete if n 990, Part X, lin	f organization answ e 21.	vered 'Yes' to Form 9	990, Part IV, line	
1a Is the organization an agent, trus included on Form 990, Part X?.				other assets not	Yes No	)
<b>b</b> If 'Yes,' explain the arrangement	ın Part XIV a	nd complete the folio	wing table:			
					Amount_	
c Beginning balance				1c		
d Additions during the year				. 1d		
e Distributions during the year				<u>1e</u>		
f Ending balance				<u> </u>		
2a Did the organization include an a	mount on For	m 990, Part X, line 2	17		Yes No	)
b If 'Yes,' explain the arrangement	in Part XIV.					
Part V. Endowment Funds Cor	nplete if or	ganization answe	ered 'Yes' to Form	990, Part IV, line 10		
	(a) Current y	year (b) Prior y	rear (c) Two years	back (d) Three years back	(e) Four years back	Κ
1a Beginning of year balance						
<b>b</b> Contributions						
- Nat lawatered common going						
c Net Investment earnings, gains, and losses						
d Grants or scholarships .						
e Other expenditures for facilities and programs						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentage	of the year e	nd balance held as:				
a Board designated or quasi-endow	ment ►	*				
b Permanent endowment ►	*					
c Term endowment ►	<del></del>					
3a Are there endowment funds not in	the persons	ion of the organizativ	on that are held and ad	lministered for the		
organization by:	i tile possessi	on or the organization	on that are new and ad	infillible red for the	Yes No	<u> </u>
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	_
b If 'Yes' to 3a(ii), are the related or					3b	
4 Describe in Part XIV the intended	-					
Part VI Investments-Land, Bu				X, line 10.		_
Description of investment		a) Cost or other basi (investment)		(c) Accumulated Depreciation	(d) Book Value	
1a Land						
<b>b</b> Buildings						
c Leasehold improvements						
d Equipment	[		25,520	25,156.	36	4.
e Other	<i>.</i>		4,373		99	3.
tatal Add lease to through to Column		al Form 900 Part Y			1 35	$\bar{i}$

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Schedule **D** (Form 990) 2009

Schedule D (Form 990) 2009 Society for the I Part VII Investments—Other Securities See Fo	orm 990. Part X. line 1:	2. N/A	06-6053077	
	(b) Book value		od of valuation	
(a) Description of security or category (including name of security)	(,,	Cost or end-o	f-year market value	
Financial derivatives	<u> </u>			
Closely-held equity interests		#-W		
Other				
·				
		* ****		
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otal. (Column (b) must equal Form 990 Part X, col. (B) line 12.)				·
Part VIII Investments—Program Related (See f				
(a) Description of investment type	(b) Book value	(c) Metho	d of valuation -year market value	
<del></del>	-	Cost or enu-or	-year market value	<del></del>
	<del>                                     </del>			
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<u></u>	1			
Part IX Other Assets (See Form 990, Part X,				-
Part IX Other Assets (See Form 990, Part X,	line 15) N/A			ok value
art IX Other Assets (See Form 990, Part X,				ok value
Part IX Other Assets (See Form 990, Part X,				ok value
Part IX Other Assets (See Form 990, Part X,				ok value
Part IX Other Assets (See Form 990, Part X,				ok value
Part IX Other Assets (See Form 990, Part X,				ok value
Part IX Other Assets (See Form 990, Part X,				ok value
Part IX Other Assets (See Form 990, Part X,				ok value
Part IX Other Assets (See Form 990, Part X,	scription			ok value
Part IX Other Assets (See Form 990, Part X, (a) Des	ne 15)		<b>(b)</b> Bo	ok value
art IX Other Assets (See Form 990, Part X, (a) Des	ne 15)		<b>(b)</b> Bo	ok value
tal. (Column (b) must equal Form 990, Part X, col.(B), Intal. (Column (b) must equal Form 990, Part X, col.(B), Intal. (a) Description of Liability	ne 15)		<b>(b)</b> Bo	ok value
tal. (Column (b) must equal Form 990, Part X, col.(B), In art X Other Liabilities (See Form 990, Part X)  (a) Description of Liability	ne 15)		<b>(b)</b> Bo	ok value
tal. (Column (b) must equal Form 990, Part X, col.(B), In art X Other Liabilities (See Form 990, Part X)  (a) Description of Liability	ne 15)		<b>(b)</b> Bo	ok value
tal. (Column (b) must equal Form 990, Part X, col.(B), In art X Other Liabilities (See Form 990, Part X)  (a) Description of Liability	ne 15)		<b>(b)</b> Bo	ok value
tal. (Column (b) must equal Form 990, Part X, col.(B), In art X Other Liabilities (See Form 990, Part X)  (a) Description of Liability	ne 15)		<b>(b)</b> Bo	ok value
tal. (Column (b) must equal Form 990, Part X, col.(B), Intal. (Column (b) must equal Form 990, Part X, col.(B), Intal. (a) Description of Liability	ne 15)		<b>(b)</b> Bo	ok value
tal. (Column (b) must equal Form 990, Part X, col.(B), Intal. (Column (b) must equal Form 990, Part X, col.(B), Intal. (a) Description of Liability	ne 15)		<b>(b)</b> Bo	ok value
Part IX Other Assets (See Form 990, Part X, (a) Desorted to the control of the co	ne 15)		<b>(b)</b> Bo	ok value
Part IX Other Assets (See Form 990, Part X, (a) Description of Liability  Otal. (Column (b) must equal Form 990, Part X, col.(B), In art X Other Liabilities (See Form 990, Part X)  (a) Description of Liability	ne 15)		<b>(b)</b> Bo	ok value
Part IX Other Assets (See Form 990, Part X, (a) Description of Liability  Otal. (Column (b) must equal Form 990, Part X, col.(B), In art X Other Liabilities (See Form 990, Part X)  (a) Description of Liability	ne 15)		<b>(b)</b> Bo	ok value
Part IX Other Assets (See Form 990, Part X, (a) Description of Liability  Otal. (Column (b) must equal Form 990, Part X, col.(B), In art X Other Liabilities (See Form 990, Part X)  (a) Description of Liability	ne 15)		<b>(b)</b> Bo	ok value
Part IX Other Assets (See Form 990, Part X, (a) Description of Liability  Otal. (Column (b) must equal Form 990, Part X, col.(B), In art X Other Liabilities (See Form 990, Part X)  (a) Description of Liability	ne 15)		<b>(b)</b> Bo	ok value

Schedule D (Form 990) 2009 Society for the Increase of the Mi		06-6053077	Page 4
Reconciliation of Change in Net Assets from Form 990 to	Financial Stateme	ents	
1 Total revenue (Form 990, Part VIII, column (A), line 12)			489,592.
2 Total expenses (Form 990, Part IX, column (A), line 25)			581,830.
3 Excess or (deficit) for the year. Subtract line 2 from line 1			-92,238.
4 Net unrealized gains (losses) on investments			
5 Donated services and use of facilities			
6 Investment expenses			
7 Prior period adjustments			
8 Other (Describe in Part XIV)			
9 Total adjustments (net). Add lines 4 through 8			
10 Excess or (deficit) for the year per audited financial statements. Combine lines			-92,238.
Part XIII Reconciliation of Revenue per Audited Financial Statemer			
Total revenue, gains, and other support per audited financial statements			,015,337.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			,020,00,1
a Net unrealized gains on investments	.   2a   525	5,745.	
		, 143.	
b Donated services and use of facilities			
c Recoveries of prior year grants			
d Other (Describe in Part XIV)	2d		EOE 745
e Add lines 2a through 2d			525,745.
3 Subtract line 2e from line 1		3	489,592.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investments expenses not included on Form 990, Part VIII, line 7b	. 4a		
<b>b</b> Other (Describe in Part XIV)	4b		
c Add lines 4a and 4b		4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		5	489,592.
Reconciliation of Expenses per Audited Financial Statement	ents With Expens	es per Return	
1 Total expenses and losses per audited financial statements		. 1	581,830.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities	.   2a		
<b>b</b> Prior year adjustments.			
c Other losses			
d Other (Describe in Part XIV)	. 2d		
e Add lines 2a through 2d	<u> </u>	2e	
3 Subtract line 2e from line 1		3	581,830.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	i i i i i i i i i i i i i i i i i i i		
a Investments expenses not included on Form 990, Part VIII, line 7b	.   4a		
•			
b Other (Describe in Part XIV)	4b		
**************************************	· · · · · · · ·	4c	E01 020
5 Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)	<u>,</u>	5	581,830.
Part XIV Supplemental Information			
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; P line 4, Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d information.	and 4b. Also complet	e this part to provide a	ny additional
··			
DAA TEANAN AMARA		Schadula D. /E	orm 990) 2009
BAA TEEA3304L 02/02/10		Juliedule D (F	2003 COUS

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Schedule D (Form 990) 2009 Society for the Increase of the Ministry	06-6053077	Page 5
Schedule D (Form 990) 2009 Society for the Increase of the Ministry  Part XIV Supplemental Information (continued)		
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# SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990.

OMB No 1545-0047

**Employer identification number** 

06-6053077

Schedule 1 (Form 990) 2009 × **≗** □ (h) Purpose of grant or assistance Rational Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form X 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (g) Description of non-cash assistance : 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?.... (f) Method of valuation (book, FMV, appraisal, other) See Part IV TEEA3901L 02/10/10 (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (d) Amount of cash grant BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Part IV and Schedule I-1 (Form 990) if additional space is needed (c) IRC section if applicable Enter total number of section 501(c)(3) and government organizations Society for the Increase of the Ministry Parkill General Information on Grants and Assistance (b) EIN 3 Enter total number of other organizations 1 (a) Name and address of organization or government ~

Page 2 Schedule I (Form 990) 2009 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22 (f) Description of non-cash assistance Parily Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. 06-6053077 (e) Method of valuation (book, FMV, appraisal, other) \_ her recommendations for the consideration of the entire committee. If a seminarian is \_applications from an individual seminary and scholarship needs of the seminarians are Applications are sent to the seminaries and the Financial Aid Officer decides which \_applications back in March along with any backup showing the financial needs of the \_ reviewed by them. The committee then meets as a whole and each member gives his or awarded a scholarship, an award letter is issued to the student, the Seminary, the \_\_students' needs are the greatest and gives out the applications. SIM gets\_ \_\_Each\_member\_of\_the\_Scholarship\_Committee\_is\_given\_copies\_of\_the\_completed (d) Amount of non-cash assistance Use Part IV and Schedule I-1 (Form 990) if additional space is needed Society for the Increase of the Ministry 208,100 (c) Amount of cash grant \_ Part J. Line 2. Grantmaker's Description of How Grants are Used \_ 85 (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) 2009 Scholarship Grants candidate.\_ Part

2009

# Schedule I, Part IV - Supplemental Information

Page 3

**Society for the Increase of the Ministry** 

06-6053077

### Part I, Line 2 - Grantmaker's Description of How Grants are Used (continued)

sponsoring Diocese, and sponsoring parish.

Checks are cut and distributed either in person by the Director of Scholarships, or they are mailed directly to the student in October and March (one half of the grant each semester).

Scholarship records are maintained by SIM for at least ten years.

### SCHEDULE O (Form 990)

# **Supplemental Information to Form 990**

OMB No 1545-0047
2009

Open to Rubille

Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

Society for the Increase of the Ministry	[06-6053077
Form 990 - Additional DBAs	
SIM	
Form 990, Part III, Line 1 - Organization Mission	
The Society for the Increase of the Ministry (herein	nafter "SIM") is organized as a
not-for-profit public foundation. SIM works closely	with the Episcopal seminaries
and_other_education_and_training_programs, as well_a	as with all bishops and
commissions_on_ministry_of_the_sponsoring_dioceses_c	of SIM recipients. SIM maintains
a close working relationship with offices of the Epi	scopal Church Center and with
the Church Pension Group (CPG), providing financial	counseling through CPG's Plan
Ahead program	
SIM maintains an identity independent of seminaries,	dioceses and national church
bodies in order to keep a clear focus on meeting the	e needs of men and women entering
Holy Orders in the Episcopal Church.	
Form 990, Part VI, Line 11 - Form 990 Review Process	
No review was or will be conducted.	
Form 990, Part VI, Line 19 - Other Organization Documents Public	ly Available
Upon request	
,	

Schedule <b>Ö</b> (Form 990) 2009	Pa	ge 2
Name of the organization	Employer Identification number	
Society for the Increase of the Ministry	06-6053077	
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02-4110-000	Scholarship (	Grants	ı	Beginning Balance 0.00
3054	AP	9/16/2009	September 2009 Kevin Caruso	750.00
3055	AP	9/16/2009	September 2009 Beatrice Dwyer	750.00
3056	AP	9/16/2009	September 2009 Karl Griswold-Kuhn	750.00
3057	AP	9/16/2009	September 2009 Stephanie Johnson	1,750.00
3058	AP	9/16/2009	September 2009 Deborah Anne Noonan	1,750.00
3059	AP	9/16/2009	September 2009 Marie Tjoflat	750.00
3060	AP	9/16/2009	September 2009 Heather Wenrick	1,000.00
3061	AP	9/16/2009	September 2009 Stephanie R. Mitchell	2,000.00
3062	AP	9/16/2009	September 2009 Joyce Scheyer	. 1,000.00
3063	AP	9/16/2009	September 2009 Joyce M. Scheyer	2,000.00
3064	AP	9/16/2009	September 2009 Kathleen H. Berkowe	. 2,000.00
3065	AP	9/16/2009	September 2009 Edwin Chinery	1,750.00
3066	AP	9/16/2009	September 2009 Joseph Dirbas	1,250.00
3067	AP.	9/16/2009	September 2009 Richard Galloway	1,750.00
3068	AP	9/16/2009	September 2009 Farrell D. Graves '	1,750.00
3069	AP	9/16/2009	September 2009 Sahra M. Harding	1,500.00
3070	AP	9/16/2009	September 2009 Matthew Holcombe	1,750.00
3071	AP	9/16/2009	September 2009 Gabriel Lamazares	1,500.00
3072	AP	9/16/2009	September 2009 Shelley McDade	1,750.00
3073	AP	9/16/2009	September 2009 Gregory McIntyre .	750.00
3074	AP	9/16/2009	September 2009 Anna Noon	1,000.00
3075	AP	9/16/2009	September 2009 Maria Chrisina Paglinauan	1,750.00
3076	AP	9/16/2009	September 2009 Terry Shields	1,000.00
3077	AP	9/16/2009	September 2009 Suzanne Toro	2,000.00

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# Account Activity, July 2009 - Jur 2010

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Page:

Reference	Journal	Date	Month	Description	Debit	Crec
3078	AP	9/16/2009	September 2009	Elisabeth Tunney	1,500.00	
3079	AP	9/16/2009	September 2009	Daron Vroon	1,000.00	
3080	AP	9/16/2009	September 2009	Anne Witt	1,250.00	
3081	AP	9/23/2009	September 2009	Bryan O'Carroli	1,750.00	
3085	AP	10/1/2009	October 2009	Audrey Abt	500.00	
3086	AP	10/1/2009	October 2009	Joan Louise Grant	1,500.00	
3087	AP	10/1/2009	October 2009	Michael Wernick	500.00	
3088	AP	10/1/2009	October 2009	Kathym Macek	1,500.00	
3089	AP	10/1/2009	October 2009	Andrew T. Shamel	1,750.00	
3090	AP	10/1/2009	October 2009	Jonathan Sy	1,750.00	
3091	AP	10/1/2009	October 2009	Stephen Carson	1,250.00	
3092	AP	10/1/2009	October 2009	Robert Crow	1,250.00	
3093	AP	10/1/2009	October 2009	Alvin Crumpton IV	1,250.00	•
3094	AP	10/1/2009	October 2009	Thomas DiMarco	750.00	
3095	AP	10/1/2009	October 2009	Harry Jenkins	1,250.00	
3096 🔍	, AP	10/1/2009	October 2009	Jane Johnson	1,500.00	
3097	, AP	10/1/2009	October 2009	Amanda Lippe	1,500.00	
3098	AP	10/1/2009	October 2009	Abigail Moon	1,000.00	
3099	AP	10/1/2009	October 2009	Alice Rutland	1,500.00	
3100	AP	10/1/2009	October 2009	Mary Wolfenbarger	1,250.00	
3101		10/1/2009	October 2009	Angela M. Cortinas	1,750.00	
3102		10/1/2009	October 2009	Isaias Ginson	1,500.00	
3103		10/1/2009	October 2009	Deborah J. Hughes-Habel	750.00	
3104		10/1/2009	October 2009	Stephen W. Kidd	1,750.00	
3105		10/1/2009	October 2009	Andrew Lobban	1,750.00	
3106		10/1/2009	October 2009	Kathleen Pfister	2,000.00	
3107		10/1/2009	October 2009	Diane Pike	1,000.00	
		10/1/2009	October 2009	Christina Robertson	500.00	
3108 3109		10/1/2009	October 2009	Martha M. Horn	500.00	
		10/1/2009	October 2009			
3110		10/1/2009	October 2009	Hannah E. Mudge	1,000.00 1,200.00	
3111				Craig M. Stephans		
3112		10/1/2009	October 2009	Jordan Hylden	1,750.00	
3113		10/1/2009		James K. Lee	1,000.00	
3114		10/1/2009	October 2009	Thomas P. H. Warren	1,000.00	
3115				Martha Watson	500.00	
3119				Michael Angell	1,400.00	
3120			October 2009	Kirsten Baer	887.50	
3121				Timothy Baer	887.50	
3122				Melissa Bruckart	1,000.00	
3123				Peter Doddema	1,000.00	
3124				Geoffrey D. Doolittle	1,200.00	
3125			October 2009	Heather Erickson	887.50	
3126				David Erickson	887.50	
3127				Geoffrey P. Evans	1,100.00	
3128				Christine M. Faulstich	1,100.00	
3129				Stephen D. Foisie	1,000.00	
3130				Lisa Hoffman	750.00	
3131				Jessica T. Knowles	1,250.00	
3132		10/28/2009	October 2009	James J. Livingston	750.00	
3133	AP 1	10/28/2009	October 2009	Julia W. Messer	1,100.00	
3134	AP 1	10/28/2009	October 2009	Amy E. Porterfield	1,750.00	
3135	AP 1	10/28/2009		Josiah Rengers	1,000.00	
3136				Clay Riley	1,250.00	
3137	AP 1	10/28/2009	October 2009	Christopher M. Robinson	1,000.00	

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Reference	Journal	Date	Month	Description	Debit
3138	AP	10/28/2009	October 2009	Patricia Sexton	750.00
3139	AP	10/28/2009	October 2009	Benson E. Shelton	1,250.00
3140	AP	10/28/2009	October 2009	Charles Smith	750.00
3141	AP	10/28/2009	October 2009	Brian W. Turner	1,100.00
3142	AP	10/28/2009	October 2009	Matthew A. Venuti	1,200.00
3143	AP		October 2009	Seth Walley	750.00
3144	AP	10/28/2009	October 2009	Virginia Wilder	1,000.00
3229	AP	1/13/2010	January 2010	Stephen Carson	1,250.00
3230	AP	1/13/2010	January 2010	Robert Crow	1,250.00
3231	AP	1/13/2010	January 2010	Alvin Crumpton IV	1,250.00
3232	AP	1/13/2010	January 2010	Thomas DiMarco	750.00
3233	AP	1/13/2010	January 2010	Harry Jenkins	1,250.00
3234	AP	1/13/2010	January 2010	Jane Johnson	1,500.00
3235	AP	1/13/2010	January 2010	Amanda Lippe	1,500.00
3236	AP	1/13/2010	January 2010	Abigail Moon	1,000.00
3237	AP	1/13/2010	January 2010	Alice Rutland	1,500.00
3238	AP	1/13/2010	January 2010	Mary Wolfenbarger	1,250.00
3243	AP		January 2010	Kathleen H. Berkowe	2,000.00
3244	AP	1/20/2010	January 2010	Edwin Chinery	1,750.00
3245			January 2010	Joseph Dirbas	1,250.00
3246			January 2010	Richard Galloway	1,750.00
3247			January 2010	Farrell D. Graves	1,750.00
3248			January 2010	Sahra M. Harding	1,500.00
3249			January 2010	Matthew Holcombe	1,750.00
3250			January 2010	Gabriel Lamazares	1,500.00
3251			January 2010	Shelley McDade	1,750.00
252			January 2010	Gregory McIntyre	750.00
253			January 2010	Anna Noon	1,000.00
254			January 2010	Maria Cristina Paglinaua	1,750.00
255			January 2010	Terry Shields	1,000.00
256			January 2010	Suzanne Toro	2,000.00
257			January 2010	Elisabeth Tunney	1,500.00
258			January 2010	Daron Vroon	1,000.00
259			January 2010	Anne Witt	1,250.00
264			February 2010	Kevin Caruso	750.00
265			February 2010	Beatrice Dwyer	750.00
266			February 2010	Karl Griswold-Kuhn	750.00
267			February 2010	Stephanie Johnson	1,750.00
268			February 2010	Deborah Anne Noonan	1,750.00
269			February 2010	Marie Tjoflat	750.00
270			February 2010	Heather Wenrick	1,000.00
271			February 2010	Audrey Abt	500.00
272			February 2010	Michael Wemick	500.00
273			February 2010	Kathym Macek	1,500.00
274			February 2010	Andrew T. Shamel	1,750.00
275			February 2010	Stephanie R. Mitchell	2,000.00
276			February 2010	Joyce M. Scheyer	2,000.00
277			February 2010	Bryan O'Carroll	1,750.00
278			February 2010	Jonathan Sy	1,750.00
279			February 2010	Angela M. Cortinas	1,750.00
280			February 2010	Isaias Ginson	1,500.00
81			February 2010	Deborah J. Hughes-Habel	750.00
82			February 2010	Stephen W. Kidd	1,750.00
83	AP 2	/1 <b>/</b> 2010 F	February 2010	Andrew Lobban	1,750.00

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### Account Activity, July 2009 - Jun

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2/1/2010

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2/1/2010

5/26/2010

February 2010

May 2010

Reference Journal Date Month Description Debit 3284 Kathleen Pfister AP 2/1/2010 February 2010 2,000.00 3285 AP 2/1/2010 February 2010 Diane Pike 1,000.00 3286 AP 2/1/2010 February 2010 Christina Robertson 500.00 February 2010 3287 AP 2/1/2010 Martha M. Hom 500.00 3288 AP 2/1/2010 February 2010 Hannah E. Mudge 1,000.00 3289 AP 2/1/2010 February 2010 Jordan Hylden 1,750.00 3290 AP 2/1/2010 February 2010 James K. Lee 1,000.00 3291 AP 2/1/2010 February 2010 Thomas P. H. Warren 1,000.00 3292 AP 2/1/2010 February 2010 Martha Watson 500.00 3293 AP 2/1/2010 February 2010 Michael Angell 1,400.00 3294 AP 2/1/2010 February 2010 Kirsten Baer 887.50 3295 AP 2/1/2010 February 2010 **Timothy Baer** 887.50 3296 AP 2/1/2010 February 2010 Melissa Bruckart 1,000.00 3297 AP 2/1/2010 February 2010 Peter Doddema 1,000.00 3298 AP 2/1/2010 February 2010 Geoffrey D. Doolittle 1,200.00 3299 AP 2/1/2010 February 2010 Heather Erickson 887.50 3300 AP 2/1/2010 February 2010 **David Erickson** 887.50 3301 AP 2/1/2010 February 2010 Geoffrey P. Evans 1,100.00 3302 AP 2/1/2010 February 2010 Christine M. Faulstich 1,100.00 3303 AP 2/1/2010 February 2010 Stephen D. Foisie 1,000.00 3304 AP 2/1/2010 February 2010 Lisa Hoffman 750.00 3305 AP 2/1/2010 February 2010 Jessica T. Knowles 1,250.00 3306 AP 2/1/2010 February 2010 James J. Livingston 750.00 3307 AP 2/1/2010 February 2010 Julia W. Messer 1,100.00 3308 AP 2/1/2010 February 2010 Amy E. Porterfield 1,750.00 3309 AP 2/1/2010 February 2010 Josiah Rengers 1,000.00 2/1/2010 3310 AP February 2010 Clay Riley 1,250.00 3311 AP 2/1/2010 February 2010 Christopher M. Robinson 1,000.00

Patricia Sexton

**Charles Smith** 

Brian W. Turner

Seth Walley

Virginla Wilder

Otis Gaddis III

Scholarship Grants

Matthew A. Venuti

Benson E. Shelton

750.00

750.00

1,250.00

1,100,00

1,200.00

750.00

1,000.00

2,900.00

208.100.00

208,100.00

Subtotal

**Current Balance** 

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