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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning , 2010, and ending , 20

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization WALKER MINISTRIES INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) POST OFFICE BOX 776

Room/Suite

City or town, state or country, and ZIP + 4 PERRY FL 32348-0776

D Employer identification number 01-0817613

E Telephone number (850) 672-9155

G Gross receipts $ 75,524

F Name and address of principal officer

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c)( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ N/A

H(c) Group exemption number ▶

K Form of organization ☐ Corporation ☐ Trust ☐ Association ☐ Other ▶ **L** Year of formation **M** State of legal domicile

Part I Summary

1 Briefly describe the organization's mission or most significant activities: See attachment #1

2	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
3	Number of voting members of the governing body (Part VI, line 1a)	3	3
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	
6	Total number of volunteers (estimate if necessary)	6	
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	79,485	75,524
9	Program service revenue (Part VIII, line 2g)		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
12	Total revenue -- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	79,485	75,524
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,598	7,088
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	65,340	65,029
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	68,938	72,117
19	Revenue less expenses Subtract line 18 from line 12	10,547	3,407

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	-2,437	881
21	Total liabilities (Part X, line 26)	89	
22	Net assets or fund balances Subtract line 21 from line 20	-2,526	881

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Part II Signature Block

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

Sign Here

Signature of officer — Date 6/15/11

Billy Walker - President
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name BARBARA S WITHERS	Preparer's signature Barbara S. Withers	Date 6-9-11	Check ☒ if self-employed — PTIN
Firm's name ▶ BARBARA SHEEHAN WITHERS CPA			Firm's EIN ▶
Firm's address ▶ 411 LIVE OAK PLANTATION RD TALLAHASSEE FL 32312			Phone no (850) 893-4080

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2010)

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Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response to any question in this Part III ☐

1 Briefly describe the organization's mission

See attachment #2

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4b (Code _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4c (Code _____) (Expenses $ _____ including grants of $ _____) (Revenue $ _____)

4d Other program services (Describe in Schedule O)

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

4e Total program service expenses ▶ $

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	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 I	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501 (h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III N/A	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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X
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		X
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		X
b	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	11b		X
c	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	11c		X
d	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	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
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 (see instructions)	17		X
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		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		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) N/A	20b		

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? N/A	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? N/A	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? N/A	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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If ' Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If ' Yes," complete Schedule L, Part II	26	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If ' Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 ☐ Yes ☒ 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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0			
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?			1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		N/A	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		N/A	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		X
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			5a		X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5c		
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		N/A	6a		X
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			6b		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A			
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	If "Yes," did the organization notify the donor of the value of the goods or services provided?		N/A	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		X
h	If the organization received a contribution of cars, boats, airplanes or other vehicles, did the organization file a Form 1098-C?			7h		X
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		X
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		X
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		X
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state?			13a		X
	Note. See the instructions for additional information the organization must report on Schedule O					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			14b		X

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

Check if Schedule O contains a response to any question in this Part VI ☐

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	3		
b	Enter the number of voting members included in line 1a, above, who are independent	1b			
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Does the organization have members or stockholders?		6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a		X
b	Each committee with authority to act on behalf of the governing body?		8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		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? N/A	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? N/A	12b		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done N/A	12c		
13	Does the organization have a written whistleblower policy?	13		X
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?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, 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		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? N/A	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ See attachment #3

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

Check if Schedule O contains a response to any question in this Part VII ☐

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

- 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, if any See instructions for definition of ``key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

☒ Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		INDIVIDUAL TRUSTEE OR DIRECTOR	INSTITUTIONAL TRUSTEE	OFFICER	KEY EMPLOYEE	HIGHEST COMPENSATED EMPLOYEE	FORMER				
BILLY G WALKER PRESIDENT	40.00	X		X					0	0	2,363
GAIL WALKER VICE PRESIDENT	40.00	X		X					0	0	2,363
GENEVA WALKER SECRETARY-TREASURER	40.00	X		X					0	0	2,362

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		INDIVIDUAL TRUSTEE OR DIRECTOR	INSTITUTIONAL TRUSTEE	OFFICER	KEY EMPLOYEE	HIGHEST COMPENSATED EMPLOYEE	FORMER				
1b **Sub-total** ▶									0	0	7088
c **Total from continuation sheets to Part VII, Section A** ▶											
d **Total (add lines 1b and 1c)** ▶									0	0	7088

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

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMTS	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, & similar amounts not included above	1f	75,524			
	g	Noncash contributions included in lines 1a-1f	$				
	h	**Total.** Add lines 1a-1f	▶	75,524			
PROGRAM SERVICE REVENUE			**Business Code**				
	2a						
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a-2f	▶				
OTHER REVENUE	3	Investment income (including dividends, interest, and other similar amounts)	▶				
	4	Income from investment of tax-exempt bond proceeds	▶				
	5	Royalties	▶				
			(i) Real / (ii) Personal				
	6a	Gross Rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)	▶				
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory					
	b	Less cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)	▶				
	8a	Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from fundraising events	▶				
	9a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities	▶				
	10a	Gross sales of inventory, less returns and allowances	a				
	b	Less cost of goods sold	b				
	c	Net income or (loss) from sales of inventory	▶				
		Miscellaneous Revenue	**Business Code**				
	11a						
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a-11d	▶				
	12	**Total revenue.** See instructions	▶	75,524			

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U S See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	7,088		7,088	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting	325		325	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	1,442		1,442	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	40,457	40,457		
18	Payments of travel or entertainment expenses for any federal, state or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	MUSIC/ COSTUMES ETC.	8,543	8,543		
b	TABLE PRODUCTS	4,138	4,138		
c	TELEPHONES/COMMUNICATIONS	3,596	3,596		
d	MINISTRY SUPPLIES	2,765	2,765		
e	POSTAGE/SHIPPING	1,240		1,240	
f	All other expenses #4	2,523	2,523		
25	**Total functional expenses.** Add lines 1 through 24f	72,117	62,022	10,095	
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
ASSETS	1	Cash -- non-interest bearing	-2,437	1	-62
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	943
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501 (c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a			
	b	Less accumulated depreciation — 10b		10c	
	11	Investments -- publicly traded securities		11	
	12	Investments -- other securities See Part IV, line 11		12	
	13	Investments -- program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	-2,437	16	881
LIABILITIES	17	Accounts payable and accrued expenses	89	17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	89	26	
NET ASSETS OR FUND BALANCES		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	-2,526	27	881
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	-2,526	33	881
	34	Total liabilities and net assets/fund balances	-2,437	34	881

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	75,524
2	Total expenses (must equal Part IX column (A) line 25)	2	72,117
3	Revenue less expenses Subtract line 2 from line 1	3	3,407
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-2,526
5	Other changes in net assets or fund balances (explain in Schedule O)	5	
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	881

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII ☐

				Yes	No
1	Accounting method used to prepare the Form 990 ☒ Cash ☐ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b		X
c	If "Yes" to lines 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?	N/A	2c		
	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 separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		X
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	N/A	3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization	Employer identification number
WALKER MINISTRIES INC	01-0817613

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☒ An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions--subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I b ☐ Type II c ☐ Type III-Functionally integrated d ☐ Type III-Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? — 11g(i)		X
(ii) A family member of a person described in (i) above? — 11g(ii)		X
(iii) A 35% controlled entity of a person described in (i) or (ii) above? — 11g(iii)		X

h Provide the following information about the supported organization(s)

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

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II
If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	81,294	82,587	82,082	79,485	75,524	400,972
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	81,294	82,587	82,082	79,485	75,524	400,972
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						400,972

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	81,294	82,587	82,082	79,485	75,524	400,972
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)	81,294	82,587	82,082	79,485	75,524	400,972

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	100.00 %
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	100.00 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2010** (line 10c, column (f) divided by line 13, column (f))	17	0.00 %
18	Investment income percentage from **2009** Schedule A, Part III, line 17	18	%

19a **33 1/3 % support tests -- 2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3 % support tests -- 2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ 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, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open To Public Inspection

Name of the organization
WALKER MINISTRIES INC

Employer identification number
01-0817613

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

Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	(c) Corrected? No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ $

Part II **Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization? To	(b) From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	(e) No	(f) Approved by board or committee? Yes	(f) No	(g) Written agreement? Yes	(g) No
BILLY WALKER		X	314	314		X		X		X
GAIL WALKER		X	314	314		X		X		X
GENEVA WALKER		X	315	315		X		X		X
Total			▶ $	943						

Part III **Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered " Yes" on Form 990, Part IV, line 27

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

Part IV **Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

Part V **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ **Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization	Employer identification number
WALKER MINISTRIES INC	01-0817613

COPIES OF ALL ITEMS ARE FURNISHED UPON
REQUEST AT NO CHARGE.
THE 990 FORM IS REVIEWED BY ALL MEMBERS
AND SIGNED BY THE PRESIDENT UPON APPROVAL.

990 PRIMARY EXEMPT PURPOSE

Attachment 1: Form 990 Page 1, Part I

Open to Public Inspection	For calendar year 2010 or tax period beginning , and ending

Name of Organization	Employer Identification Number
WALKER MINISTRIES INC	01-0817613

Primary Purpose

WALKER MINISTRIES INC IS A MUSIC MINISTRY. THE MUSICAL PERFORMANCES ARE PROVIDED BY THE 3 OFFICERS WHO ARE FAMILY MEMBERS AND TRAVEL THROUGHOUT THE UNITED STATES PROVIDING RELIGIOUS MUSIC FOR VARIOUS CHURCHES AND ORGANIZATIONS. THIS SINGING MINISTRY PROVIDES ITS OFFERING FOR PURELY RELIGIOUS PURPOSES AND RECEIVES DONATIONS OR OFFERINGS TO HELP DEFRAY TRAVELING EXPENSES FROM ITS HOME BASE IN PERRY, FLORIDA, TO PERFORMANCES THROUGHOUT THE UNITED STATES. THE ATTACHED ITINERARY SHOWS THE TRAVELS DURING 201 TO STATES THROUGHOUT THE SOUTHEAST, NEW ENGLAND, THE EASTERN SEABOARD, THE MIDWEST, AND INCLUDED THE FOLLOWING STATES: FL, GA, SC, NC, TN, AL, LA, MS, TX, OK, KS, MO, IA, IL, MI, MD, IN, KY, DE, WV, PA, DE, RI CT, MA, ME, AND NEW BRUNSWICK, CANADA.

990 PRIMARY EXEMPT PURPOSE

Attachment 2: Form 990 Page 2, Part III

Open to Public Inspection	For calendar year 2010 or tax period beginning , and ending

Name of Organization	Employer Identification Number
WALKER MINISTRIES INC	01-0817613

Primary Purpose

WALKER MINISTRIES INC IS A MUSIC MINISTRY. THE MUSICAL PERFORMANCES ARE PROVIDED BY THE 3 OFFICERS WHO ARE FAMILY MEMBERS AND TRAVEL THROUGHOUT THE UNITED STATES PROVIDING RELIGIOUS MUSIC FOR VARIOUS CHURCHES AND ORGANIZATIONS. THIS SINGING MINISTRY PROVIDES ITS OFFERING FOR PURELY RELIGIOUS PURPOSES AND RECEIVES DONATIONS OR OFFERINGS TO HELP DEFRAY TRAVELING EXPENSES FROM ITS HOME BASE IN PERRY, FLORIDA, TO PERFORMANCES THROUGHOUT THE UNITED STATES. THE ATTACHED ITINERARY SHOWS THE TRAVELS DURING 201 TO STATES THROUGHOUT THE SOUTHEAST, NEW ENGLAND, THE EASTERN SEABOARD, THE MIDWEST, AND INCLUDED THE FOLLOWING STATES: FL, GA, SC, NC, TN, AL, LA, MS, TX, OK, KS, MO, IA, IL, MI, MD, IN, KY, DE, WV, PA, DE, RI CT, MA, ME, AND NEW BRUNSWICK, CANADA.

990 BOOKS ARE IN CARE OF

Attachment 3: Form 990 Page 6, Part VI, Section C, Line 20

Open to Public Inspection	For calendar year 2010 or tax period beginning , and ending

Name of Organization	Employer Identification Number
WALKER MINISTRIES INC	01-0817613

Part VI - Line 20

Individual Name or Business Name: GAIL G WALKER

Street Address: 224 FOREST CIRCLE

U S Address

Zip code: 32348 City: Perry State: FL

or

Foreign Address

City:

Province or State:

Country:

Postal code:

Phone Number: (850)672-9155

Fax Number:

709 SCHEDULE OF OTHER EXPENSES

Attachment 4: Form 990 Page 10, Line 24 - Other Expenses

Open to Public Inspection | For calendar year 2010 or tax period beginning , and ending

Name of Organization: WALKER MINISTRIES INC

Employer Identification Number: 01-0817613

Other Expenses	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
DISH NETWORK/UTILITY	1,190	1,190		
BANK CHARGES	699	699		
COMPUTER & MUSICAL EQUIPMEN	458	458		
LICENSES/FEES	176	176		
Total:	2,523	2,523		

		Offering	Table	Total	Svc Avg	Church Avg.
January	25/14	6,823.10	1,378.00	8201.10	410.06	585.79
February	10/8	2,659.00	764.00	3,423.00	342.30	427.88
March	13/9	4,478.30	1,050.00	5,498.30	422.95	610.92
April	16/14	5,030.00	1261.00	6,291.00	393.19	449.38
May	18/16	6,787.65	1821.00	8,608.65	478.26	538.04
June	13/10	5,392.78	505.00	5,897.78	453.68	589.78
July	10/9	4,870.00	876.00	5,746.00	574.60	638.44
Aug.	14/13	4,723.00	1,174.00	5897.00	421.21	453.66
Sept	17/15	7,714.00	1,286.00	9000.00	529.41	600.00
Oct	13/9	5,831.00	1,241.00	7,072.00	544.00	785.78
Nov.	6/4	1,870.00	427.00	2,297.00	382.83	574.25
Dec.	11/7	2,535.00	427.00	2962.00	269.27	423.14
161 services/ 128 churches		58,713.83	12,210.00	70,923.83	440.52	551.74

January 2010

3	Hoschton, GA	CoGoP	242.00	100.00
3	Anderson, SC	Belmont CoGoP	159.00	125.00
10	St. Matthews, SC	Church of God	344.00	35.00
13	Rockingham, NC	CoGoP	150.00	35.00
15	Franklinton, NC	New Beginnings CoGoP	369.00	199.00
16	Raeford, NC	CoGoP	400.00	36.00
17-20	Sanford, NC	Plank Rd. CoGoP	1,325.10	216.00
22	Goldsboro, NC	Oaks Ridge CoGoP	277.00	119.00
24	Selma, NC	Johnston Comm. CoGoP	237.00	53.00
24	Clayton, NC	CoGoP	170.00	150.00
25-27	Raleigh, NC	All Nations Fellowship CoGoP	2,000.00	15.00
30	Estill, SC	Nixville Baptist Church	500.00	135.00
31	Darien, GA	Church of God	350.00	160.00
31	Nahunta, GA	Church of God	300.00	∅
			6,823.10	1,378.00
	(14)	Church Avg.	487.36	98.42
	(20)	Service Avg.	341.16	68.90
		Total	8,201.10	
	(14)	Church Avg.	585.79	
	(20)	Service Avg.	410.06	

February 2010

6	Chiefland, FL	N. Chiefland Church of God	300.00	Ø
7	Live Oak, FL	Pine Grove Church of God	250.00	40.00
19	Waycross, GA	Liberty Christian Church	425.00	100.00
21	Jacksonville, FL	Harvest Fellowship CoGoP	268.00	135.00
21	Middleburg, FL	Clay Hill CoGoP	112.00	160.00
22-24	Nahunta, GA	Rayben CoGoP	350.00	259.00
28	Wacissa, FL	Wacissa P/H Church	715.00	35.00
28	Perry, FL	Northside Church of God	239.00	35.00
			2,659.00	764.00
(8)		Church Avg.	332.38	95.50
(10)		Service Avg.	265.90	76.40
		Total	3,423.00	
(8)		Church Avg.	427.88	
(10)		Service Avg.	342.30	

11 March 2010

✓ 7	Panama City, FL	Grace Fellowship	500.00	180.00
✓ 7	Wewahitchka, FL	New Beginnings P/H	187.00	190.00
✓ 12	Citra, FL	Sanc. of Hope CoG	512.00	28.00
✓ 14	St. Marys, GA	CoG of	520.10	75.00
✓ 21	St. Petersburg, FL	Family Fellowship Church	600.00	127.00
✓ 21	Bradenton, FL	House of Prayer Pent. CoG	215.00	190.00
✓ 26	Decatur, TN	Cotton Port Rd. CoG	300.00	40.00
✓ 27	Erin, TN	CoG of	202.00	55.00
28-31	McEwen, TN	Bethel P/H Church	1,442.20	165.00
			4,478.30	1,050.00
	(9)	Aug. Church	497.59	116.67
	(13)	Aug. Service	344.48	80.76
		Total	5,498.30	
	(9)	Aug. Church	610.92	
	(13)	Aug. Service	422.95	

April 2010

✓ 2	Paris, TN	Freedom Fellowship	234.00	72.00
✓ 3	Lewisburg, TN	Franklin Ave. Christn. Ctr.	300.00	55.00
✓ 4	Danville, AL	Harmony Grove Church	600.00	150.00
✓ 9	Wetumpka, AL	Faith Baptist Church	700.00	55.00
✓ 11	N. Ft. Myers, FL	Open Bible Church	300.00	120.00
✓ 12	N. Ft. Myers, FL	Buddy Freddy's Country Buffett	136.00	60.00
✓ 14	Palm City, FL	Palm City Christian Fellowship	200.00	59.00
✓ 15	Ft. Pierce, FL	Apostolic Free Will Mission	367.00	107.00
✓ 17	Perry, FL	CoGoP	200.00	50.00
✓ 18	Tallahassee, FL	Lions Gate Worship Center	325.00	104.00
✓ 23	Panama City, FL	Soul Winners Church	350.00	12.00
✓ 24	Springfield, LA	Calvary Worship Center	400.00	100.00
✓ 25	Liberty, MS	Tower Hill Church	250.00	75.00
26-30	Alvin, TX	CoGoP	668.00	242.00
			5,030.00	1,261.00
		(16) Avg. Service	314.38	78.81
		(14) Avg Church	359.28	90.07
			Total	6,291.00
		(16) Avg. Service	393.19	
		(14) Avg. Church	449.38	

MAY 2010

1.....Liberty, TX	Liberty Worship Center	311.65	165.00
2.....Houston, TX	Oak Meadows Comm. Worship Ctr.	470.00	40.00
2.....Houston, TX	Cloverleaf Family Worship Center	356.00	140.00
5.....Thicket, TX	Church of God	300.00	110.00
6.....Houston, TX	Oak Glen CoGoP	616.00	150.00
7.....Houston, TX	West Little York Church of God	300.00	90.00
8.....San Marcos, TX	CoGoP	246.00	75.00
9.....Leander, TX	Church of God	900.00	120.00
16....Hurst, TX	Bethel Family Worship Center	300.00	50.00
16....Hurst, TX	Joshua for Christ	200.00	302.00
19....Harleton, TX	Family Worship Center CoGoP	250.00	60.00
21....Marshall, TX	CoGoP	425.00	205.00
22....Maud, TX	CoGoP	300.00	54.00
23....Mt. Pleasant, Tx	CoGoP	684.00	40.00
26....Dodd City, TX	Lannius Church of God	500.00	60.00
28,29..Whitesboro, TX	Family Worship Center P/H	875.00	160.00
		6,787.65	1821.00
(16)	Avg. Church	424.22	113.81
(18)	Avg. Service	377.09	101.17
		Total 8608.65	
(16)	Avg. Church	538.04	
(18)	Avg. Service	478.26	

June 2010

2.....Midwest City, OK	CoGoP	300.00	105.00
6.....Chanute, KS	Healing Ctr. Church of God	1,000.00	124.00
11.....Winona, MO	CoGoP	519.02	65.00
13.....Branson, MO	Faith and Wisdom Center	350.00	0
19.....Des Moines, IA	City Life Worship Center	430.00	35.00
20.....Des Moines, IA	Evangel Four Square Church	348.00	30.00
20-23..Centerville, IA	Solid Rock Church of God	1,163.76	80.00
24....Lynnville, IA	Church of God	250.00	0
27....Council Bluffs, IA	CoGoP	500.00	66.00
30....Zion, IL	CoGoP	532.00	0
		5,392.78	505.00
	(10) Avg. Church	539.28	50.50
	(13) Avg. Service	414.83	38.85
	Total	5897.78	
	(10) Avg. Church	589.78	
	(13) Avg. Service	453.68	

JULY 2010

7.....Royal Oak, MI	CoGoP	235.00	60.00
10.....Jackson, MI	CoGoP	438.00	70.00
11.....Adrian, MI	CoGoP	148.00	45.00
11.....Ypsilanti, MI	Victorious Life Church of God	400.00	132.00
14.....Hartford, MI	Full Gospel Assembly	350.00	35.00
18.....Wilmington, IL	Christian Faith Center	351.00	124.00
18.....Graymont, IL	1st Baptist Church	748.00	85.00
24.....New Salisbury, IN	CoGoP	200.00	75.00
25.....Island, KY	CoGoP	1,000.00	250.00
Donation to ministry		1,000.00	---------
		4,870.00	876.00

(9) Avg. Church	541.11	97.33
(10) Avg. Service	487.00	87.60

TOTAL	5746.00
(9) Avg. Church	638.44
(10) Avg. Service	574.60

August 2010

1	Branford, FL	Living Springs FWC	500.00	135.00
6	Blackville, SC	Faith Chapel P/H	300.00	69.00
7	Clinton, SC	Clinton 1st P/H	300.00	100.00
8	Seneca, SC	CoGoP	400.00	40.00
8	Anderson, SC	Belmont CoGoP	65.00	32.00
13	Newark, DE	Mt. Zion U.A.M.E	271.00	50.00
15	Delmar, DE	CoGoP	500.00	180.00
15	New Castle, DE	Liberty Fellowship	800.00	215.00
21, 22	Petersburg, WV	Spirit of Life Church	800.00	65.00
22	Keyser, WV	Keyser Assembly of God	758.00	90.00
27	Fallston, MD	Harvest ~~Chapel~~ Comm. Church	210.00	134.00
29	Rockville, MD	CoGoP	536.00	64.00
29	Millersville, MD	Landmark IPCC	450.00	Ø
			4,723.00	1,174.00
	(14)	Aug. Service	337.36	83.85
	(13)	Aug. Church	363.31	[illegible]

Total 5,897.00

(14)	Aug. Service	421.21
(13)	Aug. Church	453.66

September 2010

1	Newville, PA	Newville Assembly of God	425.00	100.00
5	Chance, MD	CoG.P	500.00	Ø
5	Laurel, DE	Victory Tabernacle CoG	500.00	15.00
6	Chance, MD	Labor Day Festival	500.00	30.00
10	New Oxford, PA	New Life Ch. of God	300.00	142.00
12	N. Scituate, RI	Faith Tabernacle	1,000.00	192.00
12-14	Mystic, CT	Potters House Ch. of God	1,500.00	120.00
17	Winchester, MA	Church of God	500.00	130.00
18	Windham, ME	Church of God	500.00	90.00
19	Portland, ME	Park Ave. Ch. of God	250.00	20.00
22	Pittsfield, ME	Solid Rock Ch. of God	636.00	121.00
24	Orland, ME	Dove Song Ch. of God	500.00	15.00
25	Winthrop, ME	More to Life Campground	300.00	42.00
26	Belfast, ME	Faith Temple Ch. of God	1,000.00	326.00
26	Whitefield, ME	Sheepscott Valley Comm. Church	203.00	35.00
			7,714.00	1,286.00
(15)	Aug. Church		514.27	85.73
(17)	Aug. Service		453.76	75.65
				9000.00
(15)	Aug. Church			600.00
(17)	Aug. Service			529.41

October 2010

1	Florenceville, NB, Canada	Family Worship Center	900.00	140.00
3	Fredericton, NB, Canada	Word of Faith Family Church	1,000.00	240.00
3	Nackawic, NB, Canada	Sure Life Assembly	1,000.00	200.00
15	Georgetown, DE	Eastern Shore Comm. Church	500.00	105.00
17-20	New Castle, DE	Comm. Vision Fellowship	910.00	175.00
22	Mt. Olive, NC	CoGoP	500.00	135.00
24	Walterboro, SC	CoGoP	230.00	81.00
30	Fruitland, GA	Church of God	500.00	110.00
31	Raybon, GA	CoGoP	291.00	60.00
			5,831.00	1,241.00
	(9)	Avg Church	647.89	137.88
	(13)	Avg. Service	448.54	95.46

Total		7,072.00
(9)	Avg. Church	785.78
(13)	Avg. Service	544.00

November 2010

14	Danville, AL	Harmony Grove Church	800.00	76.00
21	Houston, TX	Oak Meadows Comm. Church	270.00	20.00
26-28	Liberty, TX	CoGoP	500.00	200.00
28	Orange, TX	CoGoP	300.00	131.00
			1,870.00	427.00
(4)		Avg. Church	467.50	106.75
(6)		Avg. Service	311.67	71.16

Total 2,297

(4) Avg. Church 574.25
(6) Avg. Service 382.83

December 2010

1-5	Liberty, MS	Tower Hill Church	1,000.00	71.00
10	Monticello, MS	CoGoP	145.00	74.00
12	Springfield, LA	Calvary Christian Church	350.00	27.00
12	Pearl River, LA	CoGoP	100.00	105.00
18	Ormond Beach, FL	CoGoP	235.00	75.00
19	Deland, FL	Open Bible Church	500.00	15.00
19	Welaka, FL	1st Baptist	205	60.00
			2,535.00	427.00
	(7)	Avg. Church	362.14	61.00
	(11)	Avg Service	230.45	38.81
			Total	2,962.00
	(7)	Avg. Church	423.14	
	(11)	Avg. Service	269.27	