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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 January 1 , 2010, and ending December 31 , 20 10

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

C Name of organization **Messiah Foundation for Christian Communications**

Doing Business As **The Hour of Worship**

Number and street (or P O box if mail is not delivered to street address) **PO Box 1562** Room/suite

City or town, state or country, and ZIP + 4 **Fargo, ND 58107**

D Employer identification number **45-0307661**

E Telephone number **701-237-6770**

G Gross receipts $ **238,951.**

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)

H(c) Group exemption number ▶

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

J Website: ▶

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: **1967**

M State of legal domicile: **ND**

Part I Summary

1	Briefly describe the organization's mission or most significant activities: **Provides a weekly Sunday morning worship service via WDAY-6 and its affiliates in ND reaching all ND, NWMN, NESD, and small portion of southern Manitoba, Canada, from the sanctuary of Messiah Lutheran Church, Fargo, ND**		
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	7
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	7
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	10
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
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)		31,430.
9	Program service revenue (Part VIII, line 2g)		0
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		62,732.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		94,162.
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
14	Benefits paid to or for members (Part IX, column (A), line 4)		0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)		0
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		97,746.
19	Revenue less expenses. Subtract line 18 from line 12		(3,584.)

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)		681,635.
21	Total liabilities (Part X, line 26)		5,803.
22	Net assets or fund balances. Subtract line 21 from line 20		675,832.

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: 5-13-11

Type or print name and title: Linda Mongo, Treas.

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name ▶			Firm's EIN ▶	
Firm's address ▶			Phone no	

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

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:

Provide a televised weekly Sunday worship service.

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 $ **68,850.** including grants of $) (Revenue $)

Air time charges from WDAY-6 and affiliates for 51 weeks.

4b (Code:) (Expenses $ **12,000.** including grants of $) (Revenue $)

Given to Messiah Lutheran Church for unspecified miscellaneous expenses related to airing the worship service.

4c (Code:) (Expenses $ **8,715.** including grants of $) (Revenue $)

Fees paid to Wells Fargo Brokerage in handling securities.

4d Other program services. (Describe in Schedule O.)
(Expenses $ **8,181** including grants of $) (Revenue $)

4e **Total program service expenses** ▶ **97,746**

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	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	✓	
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		✓
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		✓
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*	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		✓
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		✓
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		✓
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		✓
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		✓
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		✓
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		✓
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		✓
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		✓
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		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a		✓
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		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
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		✓
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		✓
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		✓
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		✓
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		✓
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		✓
20 a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		✓
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)	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		✓
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		✓
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		✓
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		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		✓
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		✓
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		✓
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		✓
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		✓
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		✓
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		✓
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		✓
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		✓
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		✓
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		✓
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		✓
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		✓
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		✓
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		✓
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		✓
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	✓	

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			
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? .	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			✓
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	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			✓
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	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .	5a			✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			✓
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?	6a			✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			✓
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			✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			✓
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			
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			✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f			✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			✓
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			✓
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			✓
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			✓
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			✓
	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			✓
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* .	14b			

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	7		
b	Enter the number of voting members included in line 1a, above, who are independent .	1b	7		
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			✓
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			✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5			✓
6	Does the organization have members or stockholders?	6			✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a			✓
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b			✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		✓	
b	Each committee with authority to act on behalf of the governing body?	8b		✓	
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			✓

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		✓
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? .	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		✓
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		✓
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	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*	12c		
13	Does the organization have a written whistleblower policy?	13		✓
14	Does the organization have a written document retention and destruction policy?	14		✓
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		✓
b	Other officers or key employees of the organization	15b		✓
	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		✓
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

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 ▶ **Linda Monge, PO Box 1562, Fargo, ND 58107 (701-237-6770)**

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 organization 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			
(1) Don Ommodt, President 1328 Oak St. N., Fargo, ND 58102	1			✓				0	0	0
(2) Ken Kennedy, V. President 1647 Birchwood, West Fargo, ND58078	0			✓				0	0	0
(3) Brady Vick, Secretary 52 32nd Ave. N., Fargo, ND 58102	0			✓				0	0	0
(4) Linda Monge, Treasurer 2309 Evergreen Rd., Fargo, ND 58102	1			✓				0	0	0
(5) LaVerne Sansted 61 18th Ave. N., Fargo, ND 58102	0	✓						0	0	0
(6) Helen Danielson RR1, Box 97, Harwood, ND 58042	0	✓						0	0	0
(7) Merrill Piepkorn 1321 3rd St. N., Fargo, ND 58102	1/2	✓						0	0	0
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										

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			
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
(26)										
(27)										
(28)										
1b **Sub-total** ▶										
c **Total from continuation sheets to Part VII, Section A** ▶										
d **Total (add lines 1b and 1c)** ▶										

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		
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		
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		

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 amounts	1a Federated campaigns	1a	0				
	b Membership dues	1b	0				
	c Fundraising events	1c	0				
	d Related organizations	1d	0				
	e Government grants (contributions)	1e	0				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	31,430.				
	g Noncash contributions included in lines 1a-1f: $						
	h **Total.** Add lines 1a–1f ▶			31,430.			
Program Service Revenue		Business Code					
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a–2f ▶			0			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			37,474.	37,474.	0	0
	4 Income from investment of tax-exempt bond proceeds ▶			0	0	0	0
	5 Royalties ▶			0	0	0	0
		(i) Real	(ii) Personal				
	6a Gross Rents	0	0				
	b Less: rental expenses	0	0				
	c Rental income or (loss)	0	0				
	d Net rental income or (loss) ▶			0	0	0	0
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory	170,047	0				
	b Less: cost or other basis and sales expenses	144,789	0				
	c Gain or (loss)	25,258	0				
	d Net gain or (loss) ▶			25,258	25,258	0	0
	8a Gross income from fundraising events (not including $ 0 of contributions reported on line 1c). See Part IV, line 18 a		0				
	b Less: direct expenses b		0				
	c Net income or (loss) from fundraising events ▶			0		0	0
	9a Gross income from gaming activities. See Part IV, line 19 a		0				
	b Less: direct expenses b		0				
	c Net income or (loss) from gaming activities ▶			0	0	0	0
	10a Gross sales of inventory, less returns and allowances a		0				
	b Less: cost of goods sold b		0				
	c Net income or (loss) from sales of inventory ▶			0	0	0	0
	Miscellaneous Revenue	Business Code					
	11a			0	0	0	0
	b			0	0	0	0
	c			0	0	0	0
	d All other revenue			0	0	0	0
	e **Total.** Add lines 11a–11d ▶			0			
	12 **Total revenue.** See instructions. ▶			94,162	94,162	0	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0	0		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	0	0	0	0
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	0	0	0	0
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	0	0	0	0
11	Fees for services (non-employees):				
a	Management	0	0	0	0
b	Legal	0	0	0	0
c	~~Accounting~~ Defraying Exp-church	12,000	12,000	0	0
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	8,715	8,715	0	0
g	Other WDAY-6 AIR TIME	68,850	68,850	0	0
12	Advertising and promotion	689	689	0	0
13	Office expenses	3,632	3,632	0	0
14	Information technology	0	0	0	0
15	Royalties	0	0	0	0
16	Occupancy	0	0	0	0
17	Travel	0	0	0	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	0	0	0	0
20	Interest	2,914	2,914	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	0	0	0	0
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	ND Fees, PO Box, Honorar	665	665	0	0
b	Maintenance	68	68	0	0
c	Foreign Tax	213	213	0	0
d		0	0	0	0
e		0	0	0	0
f	All other expenses	0	0	0	0
25	**Total functional expenses.** Add lines 1 through 24f	97,746	97,746	0	
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	10,156	1	7,514
	2	Savings and temporary cash investments	26,541	2	4,583
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	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)	0	6	0
	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 0			
	b	Less: accumulated depreciation — 10b: 0	647,871	10c	669,538
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	684,568	16	681,635
Liabilities	17	Accounts payable and accrued expenses	5,152	17	5,803
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities. Complete Part X of Schedule D	0	25	0
	26	**Total liabilities.** Add lines 17 through 25	5,152	26	5,803
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	0	27	0
	28	Temporarily restricted net assets	0	28	0
	29	Permanently restricted net assets	0	29	0
		Organizations that do not follow SFAS 117, check here ▶ ☑ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds	679,416	30	675,832
	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
	32	Retained earnings, endowment, accumulated income, or other funds	0	32	0
	33	Total net assets or fund balances	679,416	33	675,832
	34	Total liabilities and net assets/fund balances	684,568	34	681,635

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	94,162
2	Total expenses (must equal Part IX, column (A), line 25)	2	97,746
3	Revenue less expenses. Subtract line 2 from line 1	3	(3,584)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	679,416
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0
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	675,832

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	✓	
b	Were the organization's financial statements audited by an independent accountant?	2b		✓
c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c		✓
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		✓
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		

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
Messiah Foundation for Christian Communications (The Hour of Worship)	45-0307661

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 33⅓% 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 33⅓% 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)	
(ii)	A family member of a person described in (i) above?	11g(ii)	
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	

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?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

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.")	20,640	20,685	27,008	27,100	31,425	126,858
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4 **Total.** Add lines 1 through 3	20,640	20,685	27,008	27,100	31,425	126,858
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)						0
6 **Public support.** Subtract line 5 from line 4.						126,858

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	20,640	20,685	27,008	27,100	31,425	126,858
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	25,766	34,314	32,012	9,957	37,474	139,523
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	
11 **Total support.** Add lines 7 through 10						266,381

12 Gross receipts from related activities, etc. (see instructions) 12

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

Section C. Computation of Public Support Percentage

14	Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	47 %
15	Public support percentage from 2009 Schedule A, Part II, line 14	15	45 %

16a **33 1/3% support test—2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☑

b **33 1/3% support test—2009.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2010.** 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—2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ ☐

Part 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.")						
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						
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.)						

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						
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.)						

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	%
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2010** (line 10c, column (f) divided by line 13, column (f))	17	%
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 ▶ ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (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
Messiah Foundation for Christian Communications (The Hour of Worship)	**45-0307661**

Part III.4d: Other Program Expenses: $8,181: Advertising/promotions, Office expenses, Interest, ND Annual report fees, PO Box Rent, Honorariums, Maintenance, Foreign Tax.

Part V.3b: Statements Regarding Other IRS Filings & Tax Compliance: Organization has no unrelated business income.

Part VI.Sec.B.11a: All forms and reports are available to members of governing board at all times.

Part VI. Sec. C.19: Financial statements are submitted to governing board on monthly basis and upon request.

2010 SUMMARY AMENDMENT

WELLS FARGO ADVISORS

Account Number: 1933-2816
MESSIAH FOUNDATION
PO BOX 1562
FARGO ND 58107-1562

Your Financial Advisor :
STARK/MEIER/TROCHMAN
101 N PHILLIPS AVE 1ST FL
SIOUX FALLS, SD 57104
(701) 293-4910

Amended Date: 3/04/11

Year-End Account Summary

This information is NOT provided to the Internal Revenue Service, but is being provided to you for courtesy purposes. Please consult with your Financial Advisor or tax advisor regarding specific questions.

Summary of Dividends and Distributions

	Box		Amount
X	1a	**Total Ordinary Dividends**	**16,532.91**
X	1b	**Qualified Dividends**	**2,088.55**
	2a	Total Capital Gain Distributions	7,133.00
	2b	Unrecaptured Sec. 1250 Gain	0.00
	2c	Section 1202 Gain	0.00
	2d	Collectibles (28%) Gain	0.00
	3	Nondividend Distributions	0.00
	4	**Federal Income Tax Withheld**	**0.00**
	5	Investment Expenses	0.00
	6	Foreign Tax Paid	213.10
	7	Foreign Country or U.S. Possession	See Detail Section
	8	Cash Liquidation Distributions	0.00
	9	Noncash Liquidation Distributions	0.00

Summary of Interest Income

Box		Amount
1	Interest Income	13,765.98
3	Interest on U.S. Savings Bonds and Treasury Obligations	0.00
4	**Federal Income Tax Withheld**	**0.00**
5	Investment Expenses	0.00
6	Foreign Tax Paid	0.00
7	Foreign Country or U.S. Possession	See Detail Section
8	Tax-Exempt Interest	0.00
9	Specified Private Activity Bond Interest	0.00
10	Tax-exempt Bond Cusip No.	See Detail Section

Summary of Proceeds from Broker and Barter Exchange

Box		Amount
1a	Date of Sale or Exchange	See Detail Section
1b	CUSIP Number	See Detail Section
2	Gross Proceeds Less Commissions and Option Premiums	170,046.77
4	**Federal Income Tax Withheld**	**0.00**
5	Number of Shares Exchanged	Not Applicable
6	Classes of Stock Exchanged	Not Applicable
7	Description	See Detail Section
12	Cannot Take Loss on Amount in Box 2 if Box is Checked	Not Applicable

YT112066 074102 066152529112 YNNNN NNNNN NNNNNN 000002

Account Number: 1933-2816
MESSIAH FOUNDATION

Your Financial Advisor :
STARK/MEIER/TROCHMAN
101 N PHILLIPS AVE 1ST FL
SIOUX FALLS, SD 57104
(701) 293-4910

Amended Date: 3/04/11

Year-End Account Summary

This information is NOT provided to the Internal Revenue Service, but is being provided to you for courtesy purposes. Please consult with your Financial Advisor or tax advisor regarding specific questions.

Proceeds from Broker and Barter Exchange Transactions

Description (Box 7)	Cusip (Box 1b)	Price	Quantity	Trade Date (Box 1a)	Amount	Box	Transaction Description	Cost Basis Factor
ABBOTT LABORATORIES NOTES CPN 5 875% DUE 05/15/16 DTD 05/12/06 FC 11/15/06	002824AT7	116.78500	20,000.00000	07/27/2010	23,357.00	2	SALE	
BEAR STEARNS CO INC NOTES CPN 4 500% DUE 10/28/10 DTD 10/28/03 FC 04/28/04	073902CE6	0 00000	25,000 00000	10/28/2010	25,000 00	2	REDEMPTION	
EUROPACIFIC GROWTH FD CL F-1	298706409	36 12000	138.42700	05/05/2010	5,000.00	2	SALE	
	298706409	36.95000	216.50900	07/26/2010	8,000.00	2	SALE	
GOLDMAN SACHS TR HIGH YIELD FD CL A	38141W653	7.12000	702.24700	05/05/2010	5,000.00	2	SALE	
	38141W653	7.06000	566.57200	07/26/2010	4,000.00	2	SALE	
HARBOR FUND CAP APPRECIATION FD INSTL CL	411511504	33.35000	149.92500	05/05/2010	5,000.00	2	SALE	
	411511504	31.73000	409.70700	07/26/2010	13,000.00	2	SALE	
LOWE'S COMPANIES INC NOTES SEMI ANNUAL PAY CPN 5 000% DUE 10/15/15	548661CH8	112.83000	25,000.00000	07/27/2010	28,207.50	2	SALE	
MAINSTAY FDS TR EPOCH US EQUITY FD CLASS I	56063J302	12.58000	794.91300	07/27/2010	10,000.00	2	SALE	
PIMCO FDS PAC INVT MGMT SER SHORT TERM FD CLASS A	693391211	9.95000	804.02000	11/08/2010	8,000.00	2	SALE	
PIMCO FDS PAC INVT MGM LOW DURATION FD CL A	693390411	10.56000	568.18200	09/10/2010	6,000.00	2	SALE	
	693390411	10.70000	327.10300	10/07/2010	3,500.00	2	SALE	
	693390411	10.58000	283 55400	12/02/2010	3,000.00	2	SALE	

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2010 SUMMARY AMENDMENT

Your Financial Advisor :
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101 N PHILLIPS AVE 1ST FL
SIOUX FALLS, SD 57104
(701) 293-4910

Amended Date: 3/04/11

Account Number: 1933-2816
MESSIAH FOUNDATION

Year-End Account Summary

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Proceeds from Broker and Barter Exchange Transactions *Continued*

Description (Box 7)	Cusip (Box 1b)	Price	Quantity	Trade Date (Box 1a)	Amount	Box	Transaction Description	Cost Basis Factor
VANGUARD EMERGING MARKETS ETF	922042858	40.44010	125.00000	05/05/2010	5,054 92	2	SALE	
	922042858	41 82000	70.00000	07/26/2010	2,927.35	2	SALE	
VANGUARD INDEX FDS MID CAPITALIZATION STK PORT INV SHS	922908843	17.97000	278.24200	05/05/2010	5,000.00	2	SALE	
	922908843	17.48000	572.08200	07/26/2010	10,000.00	2	SALE	
TOTAL PROCEEDS FROM BROKER AND BARTER EXCHANGE					**170,046.77**	**2**		

WELLS FARGO ADVISORS

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Details of the Year-End Account Summary

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Tax reporting requirements can create differences with the amounts previously reported in monthly client statements. If you have an investment in a mutual fund, regulated investment company (RIC), real estate investment trust (REIT), or unit investment trust (UIT), some of those issuers provide reclassification information after the original tax form is printed. We will issue an amended form for information received after your original tax forms are generated.

Dividends and Distributions

Description	Notes	Payment Date	# of Payments	Activity	Amount	Box	Country
EURO PAC GRWTH FD CL F 1		12/28/2010	1	QUALIFIED DIVIDEND	801.45	1a, 1b	
GOLDMAN SACHS TR HI A		VARIOUS	12	DIVIDEND	1,827.42	1a	
GOLDMAN SACHS TR HI A		VARIOUS	12	QUALIFIED DIVIDEND	2.94	1a, 1b	
GOLDMAN SCHS COMMODITY I		VARIOUS	3	DIVIDEND	2,172.30	1a	
HARBOR FD CAP APPRC INST		12/21/2010	1	QUALIFIED DIVIDEND	142.81	1a, 1b	
HARTFORD MUT FLTG RATE A		VARIOUS	2	DIVIDEND	205.28	1a	
HUSSMAN INVT TR STRT GR		01/03/2011	1	QUALIFIED DIVIDEND	38.75	1a, 1b	
MAINSTAY EPOCH US EQTY I		VARIOUS	3	DIVIDEND	265.36	1a	
MAINSTAY EPOCH US EQTY I		VARIOUS	3	SHORT TERM CAP GAIN	739.47	1a	
MAINSTAY EPOCH US EQTY I		VARIOUS	6	QUALIFIED DIVIDEND	486.62	1a, 1b	
PIMCO FDS LOW DURATION A		VARIOUS	5	DIVIDEND	107.79	1a	
PIMCO FDS LOW DURATION A		VARIOUS	5	QUALIFIED DIVIDEND	1.96	1a, 1b	
PIMCO FDS LOW DURATION A		12/10/2010	1	SHORT TERM CAP GAIN	113.89	1a	
PIMCO FDS PAC INV MGMT A		VARIOUS	5	DIVIDEND	18.12	1a	
PIMCO FDS PAC INV MGMT A		VARIOUS	2	SHORT TERM CAP GAIN	6.19	1a	
PIMCO FDS PAC INV MGMT A		VARIOUS	5	QUALIFIED DIVIDEND	0.15	1a, 1b	
PIMCO INV GRADE BD A USD		VARIOUS	5	DIVIDEND	701.78	1a	
PIMCO INV GRADE BD A USD		VARIOUS	2	SHORT TERM CAP GAIN	2,113.23	1a	
PIMCO INV GRADE BD A USD		VARIOUS	5	QUALIFIED DIVIDEND	3.38	1a, 1b	
PRINCIPL INVS PFD SECS A		VARIOUS	5	DIVIDEND	628.19	1a	
PRINCIPL INVS PFD SECS A		VARIOUS	2	SHORT TERM CAP GAIN	99.67	1a	
PRINCIPL INVS PFD SECS A		VARIOUS	6	QUALIFIED DIVIDEND	140.13	1a, 1b	
SPDR DJ INTL RL EST ET		VARIOUS	4	DIVIDEND	1,840.25	1a	

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2010 SUMMARY AMENDMENT

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Amended Date: 3/04/11

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MESSIAH FOUNDATION

Details of the Year-End Account Summary

Dividends and Distributions *Continued*

	Description	Notes	Payment Date	# of Payments	Activity	Amount	Box	Country
	SPDR DJ INTL RL EST ET		VARIOUS	4	QUALIFIED DIVIDEND	50.23	1a, 1b	
	TEMPLETN GLBL BD INC ADV		VARIOUS	12	DIVIDEND	2,611.36	1a	
	VANGRD EMERGING MKTS ET		12/29/2010	1	DIVIDEND	162.50	1a	
	VANGRD EMERGING MKTS ET		12/29/2010	1	QUALIFIED DIVIDEND	202.97	1a, 1b	
	VANGRD MID CAP INDX INVS		VARIOUS	2	DIVIDEND	12.37	1a	
	VANGRD MID CAP INDX INVS		VARIOUS	2	QUALIFIED DIVIDEND	203.52	1a, 1b	
X	**VANGUARD REIT ET**	**$**	**VARIOUS**	**4**	**DIVIDEND**	**818.40**	**1a**	
X	**VANGUARD REIT ET**	**$**	**VARIOUS**	**4**	**QUALIFIED DIVIDEND**	**13.64**	**1a, 1b**	
	WF ADVANTAGE MM FD CL A		VARIOUS	12	DIVIDEND	0 79	1a	
	TOTAL ORDINARY DIVIDENDS (INCLUDING QUALIFIED DIVS AND SHORT TERM CAP GAINS)					**16,532.91**	**1a**	
	TOTAL QUALIFIED DIVIDENDS					**2,088.55**	**1b**	
	MAINSTAY EPOCH US EQTY I		VARIOUS	3	CAPITAL GAINS	5,859.26	2a	
	PIMCO FDS LOW DURATION A		12/10/2010	1	CAPITAL GAINS	22.70	2a	
	PIMCO FDS PAC INV MGMT A		VARIOUS	2	CAPITAL GAINS	4 84	2a	
	PIMCO INV GRADE BD A USD		VARIOUS	2	CAPITAL GAINS	1,174 30	2a	
	PRINCIPL INVS PFD SECS A		12/14/2010	1	CAPITAL GAINS	71 90	2a	
	TOTAL CAPITAL GAIN DISTRIBUTIONS (INCLUDING BOXES 2B, 2C, AND 2D, IF ANY)					**7,133.00**	**2a**	
	EURO PAC GRWTH FD CL F 1		12/28/2010	1	FOREIGN TAX	-112.80	6,7	
	SPDR DJ INTL RL EST ET		VARIOUS	2	FOREIGN TAX	-29 20	6,7	
	TEMPLETN GLBL BD INC ADV		08/20/2010	1	FOREIGN TAX	-35.71	6,7	
	VANGRD EMERGING MKTS ET		VARIOUS	2	FOREIGN TAX	-35.39	6,7	
	TOTAL FOREIGN TAX PAID					**-213.10**	**6**	

$ The company has provided tax classification of the income paid by this security The information reflected here will be marked with an X if there has been a revision from the original figures

Interest Income

Description	Notes	Payment Date	# of Payments	Activity	Amount	Box	Country	CUSIP (Box 10)
ABBOTT LABS 5 875 051516		05/17/2010	1	INTEREST	587.50	1		002824AT7
ABBOTT LABS 5 875 051516		07/27/2010	1	ACCRUED INTEREST	244 79	1		002824AT7
AEGON NV 4 625 120115		VARIOUS	2	INTEREST	1,169.10	1	NL	007924AH6

ADVISORS

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Details of the Year-End Account Summary

Interest Income *Continued*

Description	Notes	Payment Date	# of Payments	Activity	Amount	Box	Country	CUSIP (Box 10)
ASTRAZENCA PLC5 4 060114		VARIOUS	2	INTEREST	2,700.00	1	UK	046353AA6
BEAR STERNS 4 5 102810		VARIOUS	2	INTEREST	1,125.00	1		073902CE6
GECC INTRNTS 5 75 121515		VARIOUS	2	INTEREST	1,437.50	1		36966R2T2
GECC MTN 4 375 112111		VARIOUS	2	INTEREST	1,093.76	1		36962GM68
GOLDMAN SACHS5 95 011818		07/19/2010	1	INTEREST	743.75	1		38141GFG4
IBM INTL GRP 5 05 102212		VARIOUS	2	INTEREST	2,525.00	1		44924EAB6
JPMORGAN CHSE5 75 010213		VARIOUS	2	INTEREST	1,150.00	1		46625HAT7
LOWES COS INC 5 0 101515		04/15/2010	1	INTEREST	625.00	1		548661CH8
LOWES COS INC 5 0 101515		07/27/2010	1	ACCRUED INTEREST	364.58	1		548661CH8
TOTAL INTEREST INCOME NOT INCLUDED IN BOX 3					**13,765.98**	**1**		

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2010 SUMMARY AMENDMENT

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MESSIAH FOUNDATION

Details of the Year-End Account Summary

Any references below to adjusted gross income (AGI) are generally applicable only to individuals, trusts and estates subject to income tax reporting requirements. Always consult with your tax advisor or tax department.

Miscellaneous Activity Summary

Line Ref	Type	Amount
1	Margin Debit Interest	0.00
2	Municipal Bonds - OID Not Subject to AMT	0.00
3	Municipal Bonds - OID Subject to AMT	0.00
4	Expenses Subject to 2% of Adjusted Gross Income	0.00
5	Expenses Not Subject to 2% Adjusted Gross Income	0.00
6	Widely Held Fixed Investment Trusts - Other Items	See Detail
7	Master Limited Partnership Distributions	0.00
8	Investment Expense Withheld from Tax-Exempt Income	0.00
9	Federally Non-reportable Dividends and Interest	0.00
10	Accrued Interest on Purchases	462.78
11	Federal Tax Exempt Accrued Interest on Purchases	0.00
12	Other Supplementary Information	0.00
13	Option Premiums	0.00
14	Advisory Fees	8,715.47
15	American Depositary Receipt (ADR) Fees	0.00

Miscellaneous Activity Detail

Description	Notes	Payment Date	# of Payments	Activity	Amount	Line Ref
GOLDMAN SACHS5 95 011818		05/05/2010	1	ACCRUED INT PAID	462.78	10
TOTAL ACCRUED INTEREST ON PURCHASES					**462.78**	**10**
ADVISOR FEE		VARIOUS	4	ADVISORY FEES	-8,715.47	14
TOTAL ADVISORY FEES					**-8,715.47**	**14**

WELLS FARGO ADVISORS

Amended Date: 3/04/11

Account Number: 1933-2816
MESSIAH FOUNDATION

Important Realized Gain/Loss Information

This information is provided for courtesy purposes only. Each individual taxpayer should consult with a tax advisor as to any additional reporting requirements or adjustments. NO COST BASIS OR REALIZED GAIN/LOSS INFORMATION IS PROVIDED TO THE IRS, NOR IS THIS INFORMATION VERIFIED OR GUARANTEED BY FIRST CLEARING, LLC TO BE ACCURATE FOR EACH TAXPAYER'S UNIQUE REPORTING REQUIREMENTS. THEREFORE, YOU SHOULD NEVER ASSUME THIS STATEMENT IS ACCURATE IN LIEU OF COMPLETING SCHEDULE D OF YOUR TAX RETURN AND CONSULTING WITH YOUR TAX ADVISOR.

Federal tax reporting requirements will create differences between the information presented here and what appears on your Form 1099-B, including but not limited to the following situations:

* Cost basis for many fixed income tax lots has been amortized (for securities purchased at a premium) or accreted (for securities purchased at a discount), when possible, for applicable securities. For securities that were purchased at an Original Issue Discount (OID), only those positions whose cost basis has been adjusted will reflect the impacts of the OID accruals on the original cost basis. The original issue discount amount reported on your Form 1099-OID is not adjusted for market discount, acquisition premium or bond premium. Therefore, the amortization and accretion adjustments used on this statement may not be consistent with the Form 1099-OID amount because the reporting requirements on the Form 1099-OID are different.
* The Original Price represents the unadjusted price of the security. The Original Price can be used to calculate the original unadjusted cost of the security.
* Short sales are reportable on Form 1099-B before the position is closed.
* Long-term capital gains reported by a RIC or REIT appear on Form 1099-DIV only, as noted in the instructions for that form.
* Lots closed due to transfers or journals will not be reflected in the Realized Gain/Loss Statement, or on the Form 1099-B.

Realized Gain/Loss Summary	THIS YEAR GAIN	THIS YEAR LOSS	THIS YEAR NET
Short term	2,869.05	0.00	2,869.05
Long term	22,943.43	-555.00	22,388.43
Total - Realized Gain/Loss	**$25,812.48**	**-$555.00**	**$25,257.48**

Realized Gain/Loss Detail for Year

Short Term

DESCRIPTION	QUANTITY	ADJ PRICE/ ORIG PRICE	DATE ACQUIRED	CLOSE DATE	PROCEEDS	ADJ COST/ ORIG COST	GAIN/LOSS
EUROPACIFIC GROWTH FD CL F-1	138.42700	30.9400	06/24/09	05/05/10	5,000.00	4,282.94	717.06
GOLDMAN SACHS TR HIGH YIELD FD CL A	702.24700	5.9500	06/24/09	05/05/10	5,000.00	4,178.37	821.63
HARBOR FUND CAP APPRECIATION FD INSTL CL	149.92500	25.2199	05/15/09	05/05/10	5,000.00	3,781.11	1,218.89

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Realized Gain/Loss

Amended Date: 3/04/11

Account Number: 1933-2816
MESSIAH FOUNDATION

Short Term *Continued*

DESCRIPTION	QUANTITY	ADJ PRICE/ ORIG PRICE	DATE ACQUIRED	CLOSE DATE	PROCEEDS	ADJ COST/ ORIG COST	GAIN/LOSS
PIMCO FDS PAC INVT MGMT SER SHORT TERM FD CLASS A	804.02000	9.8900	07/30/10	11/08/10	8,000.00	7,951.77	48.23
PIMCO FDS PAC INVT MGM LOW DURATION FD CL A	568.18200	10.5500	07/30/10	09/10/10	6,000.00	5,994.32	5.68
	327.10300	10.5500	07/30/10	10/07/10	3,500.00	3,450.94	49 06
	283.55400	10.5500	07/30/10	12/02/10	3,000.00	2,991.50	8.50
Subtotal	**1,178.83900**				**12,500.00**	**12,436.76**	**63.24**
Total - Short Term					**$35,500.00**	**$32,630.95**	**$2,869.05**

Long Term

DESCRIPTION	QUANTITY	ADJ PRICE/ ORIG PRICE	DATE ACQUIRED	CLOSE DATE	PROCEEDS	ADJ COST/ ORIG COST	GAIN/LOSS
ABBOTT LABORATORIES NOTES CPN 5 875% DUE 05/15/16 DTD 05/12/06 FC 11/15/06	20,000.00000	0 9978	05/16/06	07/27/10	23,357.00	19,957.60	3,399.40
BEAR STEARNS CO INC NOTES CPN 4 500% DUE 10/28/10 DTD 10/28/03 FC 04/28/04	25,000.00000	1.0222	02/17/04	10/28/10	25,000.00	25,555.00	-555.00
EUROPACIFIC GROWTH FD CL F-1	216.50900	30.9400	06/24/09	07/26/10	8,000.00	6,698.79	1,301.21
GOLDMAN SACHS TR HIGH YIELD FD CL A	566.57200	5.9500	06/24/09	07/26/10	4,000.00	3,371.11	628 89
HARBOR FUND CAP APPRECIATION FD INSTL CL	409.70700	25.2199	05/15/09	07/26/10	13,000 00	10,332 81	2,667.19

Realized Gain/Loss

ADVISORS

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MESSIAH FOUNDATION

Long Term *Continued*

DESCRIPTION	QUANTITY	ADJ PRICE/ ORIG PRICE	DATE ACQUIRED	CLOSE DATE	PROCEEDS	ADJ COST/ ORIG COST	GAIN/LOSS
LOWE'S COMPANIES INC NOTES SEMI ANNUAL PAY CPN 5 000% DUE 10/15/15 DTD 10/06/05 FC 04/15/06	25,000.00000	0.9923	01/28/08	07/27/10	28,207.50	24,807.50	3,400.00
MAINSTAY FDS TR EPOCH US EQUITY FD CLASS I	794.91300	10.3100	12/05/08	07/27/10	10,000 00	8,195.56	1,804.44
VANGUARD EMERGING MARKETS ETF	125.00000	21.9797	11/24/08	05/05/10	5,054.92	2,747.47	2,307.45
	70.00000	21.9797	11/24/08	07/26/10	2,927.35	1,538.58	1,388.77
Subtotal	**195.00000**				**7,982.27**	**4,286.05**	**3,696.22**
VANGUARD INDEX FDS MID CAPITALIZATION STK PORT INV SHS	278.24200	10.5299	05/15/03	05/05/10	5,000.00	2,929.89	2,070.11
	572.08200	10.5299	05/15/03	07/26/10	10,000 00	6,024.03	3,975.97
Subtotal	**850.32400**				**15,000.00**	**8,953.92**	**6,046.08**
Total - Long Term					**$134,546.77**	**$112,158.34**	**$22,388.43**

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