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Form **990**

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)

Department of the Treasury Internal Revenue Service

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

Α	For the 2010 calend	dar year, or tax year beginning , 2010, and ending		,
В	Check if applicable		D Employer Iden	tification Number
	Address change	WORLD CHANGERS INTERNATIONAL MINISTRIES	73-1099	319
	Name change	DBA NATIVE AMERICAN CHILDREN'S FUND	E Telephone num	
	Initial return	P.O. BOX 25	(918) 2	45-5833
	Terminated	SAPULPA, OK 74066	(310) 2	3033
	\vdash			. 1 004 400
	Amended return	F. CHILITIAN M. TOPPODO TO TO	G Gross receipts	
	Application pending		(a) Is this a group return for af	₽™₽
	,	SAME AS C ABOVE	(b) Are all affiliates included? If 'No,' attach a list (see in	structions) Yes No
<u></u>	Tax-exempt status	X 501(c)(3) 501(c) () (insert no) 4947(a)(1) or 527	.,	-
J	Website: ► N/	А	(c) Group exemption number	>
K	Form of organization	X Corporation Trust Association Other ► L Year of Formation	n 1980 M State of	legal domicile OK
Pa	art 🔯 Summai	y		· · · · · · · · · · · · · · · · · · ·
	1 Briefly descri	be the organization's mission or most significant activities PROVIDES	YOUTH DEVELOPMI	ENT. FOOD.
đ)		AMPS, EDUCATIONAL OPPORTUNITIES AND RELIGIOUS T		
Ě		MERICAN CHILDREN		
Ē	302023			
Activities & Governance	2 Check this bo	if the organization discontinued its operations of disposed of more	e than 25% of its net as	ssets
Ŏ	3 Number of vo	iting members of the governing body (Part VI, line 1a)	VED 🐺 3	4
8	4 Number of in	dependent voting members of the governing body (Part VI, line 1b)	9 4	2
iţie	5 Total number	of individuals employed in calendar year 2010 (Part V, line 2a) AN 3 1	2012 0 5	0
∌	6 Total number	of volunteers (estimate if necessary)	2012 6	3
⋖		ed business revenue from Part VIII, column (C), line 12	<u>6</u> 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)	1,054,780.	1,824,415.
Revenue	9 Program serv	rice revenue (Part VIII, line 2g)		
Ş.	10 Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)		5.
æ	11 Other revenu	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12 Total revenue	e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,054,780.	1,824,420.
	13 Grants and s	milar amounts paid (Part IX, column (A), lines 1-3)	678,311.	638,732.
	14 Benefits paid	to or for members (Part IX, column (A), line 4).		
	15 Salaries, other	er compensation, employee benefits (Part IX, column (A), lines 5-10)		
69		fundraising fees (Part IX, column (A), line 11e)		
Expenses			12 15 4 16 2 1 16 16 16 2 2 2 2 2 2 2 2 2 2 2 2	1. A 是 [] [] [] [] [] [] [] [] [] [
홄	1	sing expenses (Part IX, column (D), line 25) ►416,151.	建筑地域的	
		es (Part IX, column (A), lines 11a-11d, 11f-24f).	576,561.	1,539,293.
	18 Total expense	es. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,254,872.	2,178,025.
	19 Revenue less	expenses Subtract line 18 from line 12	-200,092.	-353,605.
8			Beginning of Current Year	End of Year
Assets Baland	20 Total assets	(Part X, line 16).	23,327.	8,852.
\$8	21 Total liabilitie	s (Part X, line 26)	223,368.	562,498.
žŠ		fund balances Subtract line 21 from line 20	-200,041.	-553,646.
ΙĐ.	art II / Signatu	· · · · · · · · · · · · · · · · · · ·	200,041.	333,040.
	der penaities of perjury, I d nplete Declaration of prep	eclare that I have examined this return, including accompanying schedules and statements, and to the arer (therethan officer) is pased on all information of which preparer has any knowledge	ne best of my knowledge and be	elief, it is true, correct, and
7		MXOXX II		
یے ح	Signatu	re of officer	Date 1/1	
⊇Sie He	gn Al	77-100 - 0 100	1/6/12	2
]		m. V. Jetters In Corporate Secution		
<u>-</u>		·		DTIN
		reparer's name Proparer's signature Date	12 Check I if	PTIN
Pa	id GLENN	ELLIOTT Blank Elliott, CP t 1/6/	self-employed	P01055963
Pr	eparer Firm's name	ELLIOTT, DOZIER & HELLAND, P.C.		
<u> </u>	se Only Firm's addre	ess ► 5800 E. SKELLY DRIVE, SUITE 900	Firm's EIN ► 26	-1109909
ζ		ELLIOTT Char Clicit Cft 1161 ELLIOTT, DOZIER & HELLAND, P.C. 5800 E. SKELLY DRIVE, SUITE 900 TULSA, OK 74135 Us return with the preparer shown above? (see instructions)	Phone no (91	
—ر Ma	y the IRS discuss th	is return with the preparer shown above? (see instructions)	-	X Yes No
<i></i>	,	· · · · · · · · · · · · · · · · · · ·		<u> </u>

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

	m 990 (2010) WORLD CHANGERS INTERNATIONAL MINISTRI	ES 73-1099319	Page 2
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this F	Part III	
1	Briefly describe the organization's mission		
	PROVIDES YOUTH DEVELOPMENT, FOOD, SUMMER CAMP	S, EDUCATIONAL OPPORTUNITIES AN	D
	RELIGIOUS TRAINING TO DISADVANTAGED NATIVE AM		
2	Did the organization undertake any significant program services during the	ne year which were not listed on the prior	
	Form 990 or 990-EZ?	· _	es X No
	If 'Yes,' describe these new services on Schedule O	·	
3	,	w it conducts any program services?	res X No
Ū	If 'Yes,' describe these changes on Schedule O	With conducts, any program services.	es M NO
4	Describe the exempt purpose achievements for each of the organization'	s three largest program services by expenses So	ction 501(c)(3)
7	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to	report the amount of grants and allocations to other	ners, the total
	expenses, and revenue, if any, for each program service reported.	,	,
4 a	a (Code (Expenses \$ 1,708,070. including grants	of \$) (Revenue \$)
	THE ORGANIZATION PROVIDED SERVICES FOR DISADV	ANTAGED NATIVE AMERICAN CHILDRE	N IN THE
	FORM OF YOUTH DEVELOPMENT, FOOD, EDUCATION, S		
	ADDITION, THE ORGANIZATION HAS AS ITS MISSION		
	PUBLIC TO THE NEEDS OF THE NATIVE AMERICAN PE		
	1 0 D D C C C C C C C C C C C C C C C C C	<u></u>	
4 t	b (Code) (Expenses \$ including grants	of \$) (Revenue \$)
			
	+		
	The second of th	······································	
40	c (Code	of \$) (Revenue \$)
			
			-
	(101)		
40	d Other program services (Describe in Schedule O)		
) (Revenue \$	
	e Total program service expenses ► 1,708,070.		
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			V	
	To the case of the decembed a section 501(2)(2) a 4047(-2)(3) (11) at 11 at 12		Yes	No
'	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A.	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	<u>X</u>	
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		Х
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	-	Х
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? It 'Yes,' complete Schedule D, Part V	10	753/Plote →	X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
1	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a		х
I	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	11 b		Х_
•	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	11 c		х
•	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	11 d		х
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
1	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	11 f		X
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	Х	
l	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		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a 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		Х
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		Х
	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		Х
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		х
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		х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
20	a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		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).	20 b		

			res	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 IL .	21	Х	
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		х
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? <i>If 'Yes,' complete Schedule J</i>	23		X .
24 a	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, and 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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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
ь	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		<u>x</u>
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):			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	-	<u>X</u>
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
	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		<u>x</u>
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		<u>X</u>
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		<u>x</u>
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		<u>X</u>
а	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 X 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		<u>X</u>
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 197 Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990 (2010)

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					
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a) ~ <u>~</u>	25.3	ر:					
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	J 🎉		1.5					
c	Did the organization comply with backup withholding rules for reportable payments to vendor	rs and reportable gaming			2 44 1 5 2 4 4 5					
Ĭ	(gambling) winnings to prize winners?		1c							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-		, S.	31.54	, 6 , 6					
	ments, filed for the calendar year ending with or within the year covered by this return	2a		2 12	. 1					
b	If at least one is reported on line 2a, did the organization file all required federal employment		2b		L					
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?										
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O										
4a	At any time during the calendar year, did the organization have an interest in, or a signature financial account in a foreign country (such as a bank account, securities account, or other f	or other authority over, a								
		inancial account) ⁵	4a	<u> </u>	<u>X</u>					
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 F				ا ــــا					
	Was the organization a party to a prohibited tax shelter transaction at any time during the ta		5a		<u>X</u>					
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelf	er transaction?	5 b	_	Х					
С	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, a solicit any contributions that were not tax deductible?	nd did the organization								
	solicit any contributions that were not tax deductible?	-	6a		X					
b	If 'Yes,' did the organization include with every solicitation an express statement that such condition tax deductible?	ontributions or gifts were								
7	Organizations that may receive deductible contributions under section 170(c).		6b	l .	1					
	•				1					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and p services provided to the payor?	eartly for goods and	7a		X					
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?									
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file									
·	Form 8282?		7с		X					
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d								
е	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?									
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?										
g	If the organization received a contribution of qualified intellectual property, did the organization	on file Form 8899	1							
	as required?		7 g							
n	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	e organization file a	7 h							
			<u> </u>		1					
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring organization, h	ng organizations. Did the lave excess business								
	holdings at any time during the year?		8							
	Sponsoring organizations maintaining donor advised funds.				لــــا					
	Did the organization make any taxable distributions under section 4966?		9a	L						
	Did the organization make a distribution to a donor, donor advisor, or related person?		9b	<u> </u>	ļ					
	Section 501(c)(7) organizations. Enter	l a a . l		٠.						
	Initiation fees and capital contributions included on Part VIII, line 12	10a		-	,					
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1,35.5							
	Section 501(c)(12) organizations. Enter	ا مما	.5 (2)		+ '-					
	Gross income from members or shareholders	11 a	- 100							
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 ь			-					
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu o		12a	 	[;]					
	of Yes,' enter the amount of tax-exempt interest received or accrued during the year	126								
	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>			- 6					
	Is the organization licensed to issue qualified health plans in more than one state?		13a		1					
	Note. See the instructions for additional information the organization must report on Schedu	le O	T	· -						
ь	Enter the amount of reserves the organization is required to maintain by the states in		1 .	}						
	which the organization is licensed to issue qualified health plans	13b	_ - ∵	,						
	Enter the amount of reserves on hand	13c	,,	<u> </u>						
	Did the organization receive any payments for indoor tanning services during the tax year?		14a	•	X					
b	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	Schedule O	<u> 14b</u>		<u> </u>					

Form 990 (2010) WORLD CHANGERS INTERNATIONAL MINISTRIES 73-1099319 Part If 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 X 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 **b** Enter the number of voting members included in line 1a, above, who are independent 1 b 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? SEE SCHEDULE Ω 2 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 X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 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? b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following SEE SCHEDULE O a The governing body? 8a Χ b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Х 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? 10 a Х b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11 a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11 a X **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 Х 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a 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 X 13 Does the organization have a written whistleblower policy? 13 14 Does the organization have a written document retention and destruction policy? 14 X Did the process for determining compensation of the following persons include a review and approval by independent 7.1 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a Х b Other officers of key employees of the organization 15b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) **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 Х 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 List the states with which a copy of this Form 990 is required to be filed ▶ OK 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 X Upon request Another's website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public SEE SCHEDULE O

BAA

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

►BILL JEFFERS P.O. BOX 25 SAPULPA OK 74066 (918) 245-5833

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Form 990 (2010)

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

X Check this box if neither the organization	compensated any current officer, director, or trustee.									
(A)	(B)			-	>)			(D)	(E)	(F)
Name and title	Average hours per week (describe hours for related organiza tions in Schedule O)	ndividual trustee or director	Institutional trustee	check Officer	a Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) STANLEY BITOSI	 					۵	┝			
DIRECTOR	0	X						0.	٥.	0.
(2) IVEY SANDEL DIRECTOR	0	х						0.	0.	0.
(3) WILLIAM T. JEFFERS, SR PRESIDENT	40			Х				0.	0.	0.
_(4) WILLIAM_T. JEFFERS, JR SECRETARY	20			Х				0.	0.	0.
_(5)										
		į								
(9)							-			
(10)										
(11)										
(12)										
(13)								-		
(14)										
(15)										
(16)	1									
(17)										

TEEA0107L 12/21/10

Partivili Section A. Officers, Directors, Trus		\ey				es,	and			
(A) Name and title	(B) Average	Posi	tion ((c) (check all that apply)			(vlaa	(D) Reportable	(E)	(F)
	hours per week (describe hours for related organi zations in Sch O)			Officer		Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organization (W 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(18)										-
(19)										
20)										
(21)									 	
(22)								-		
(23)										
(24)									· · · · -	
(25)										
(26)										
(27)										
(28)										
(29)										
1 b Sub-total	•	•						0.	0	0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	A						>	0.	C	0. 0
2 Total number of individuals (including but not limite from the organization ► 0	d to tho	se li	sted	labo	ove)	wh	o red	ceived more than	\$100,000 in repo	
3 Did the organization list any former officer, director	or trust	ee l	kev	emr	nlovi	ap (or hi	ahest compensat	ed employee	Yes No
on line 1a? If 'Yes,' complete Schedule J for such in	ndıvıdua	a/	-		·				, ,	3 X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t such individual			٠							4 X
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' of Section B. Independent Contractors	ompens complete	atio e Sc	n fro hed	om a ule .	any <i>J foi</i>	unre r <i>su</i> e	elate ch p	d organization or erson	ındıvıdual	5 X
Complete this table for your five highest compensate compensation from the organization	ed inde	pend	dent	con	ntrac	tors	tha	t received more t	han \$100,000 of	<u> </u>
(A) Name and business addres	s		••••					(B Description	of services	(C) Compensation

2 Total number of independent contractors (including \$100,000 in compensation from the organization ▶		lımı	ted t	to th	nose	list	ed a	bove) who receiv	ed more than	

Pai	<u>τ νι</u>	II Statement of Re	venue					
	3			- 1	(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
-		•	-			function revenue	revenue	under sections 512, 513, or 514
<u>'</u>	1 2	Federated campaigns	1a			Tevende		312, 313, 01 314
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS		· -			-		•	
& Š		Membership dues	1b					
A S		Fundraising events	1c					
분위	d	Related organizations						-
S,≝	е	Government grants (contribution	ons) 1e					ŀ
S ⊠		All albertantululurur aifir a						
돌뮈	ī	All other contributions, gifts, g similar amounts not included	above 1 1 f	1,824,415.				!
<u></u>								
88		Noncash contributions include	u in ins ra-ii 📮		1 004 415			
	<u>h</u>	Total. Add lines 1a-1f		<u> </u>	1,824,415.			
₩.				Business Code				
=	2 a							
2 1	b							
길	С							
- ≩	4						-	
S	-							
₹	e						<u>-</u>	
PROGRAM SERVICE REVENUE		All other program service	ce revenue	L				
-	g	Total. Add lines 2a-2f						t i
	3	Investment income (inc	ludina dividend	ds, interest and				
		other similar amounts)	ŭ	· •	5.			5.
	4	Income from investmen	t of tax-exemp	t bond proceeds				
	5	Royalties .		•				
			(i) Real	(II) Personal			*	
	63	Gross Rents	· · · · · · · · · · · · · · · · · · ·	,,,				İ
								
		Less. rental expenses						Ì
		Rental income or (loss)						
	d	Net rental income or (lo	ss)					<u> </u>
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
	-	assets other than inventory						
	L	Less, cost or other basis						
	D	and sales expenses						1
		Gain or (loss)						-
		Net gain or (loss)						
		, ,						
ш	8a	Gross income from fund	draising events	;				
OTHER REVENUE		(not including \$		-				l
E		of contributions reporte	d on line 1c)					
8		See Part IV, line 18		a				
품	b	Less direct expenses.		b				
Ò	С	Net income or (loss) fro	m fundraising	events.				
	Уa	Gross income from gan See Part IV, line 19	ning activities	a				,
		Less: direct expenses		h	-			<u>'</u>
				<u> </u>				!
	С	Net income or (loss) from	om gaming act	ivities				
	10 a	Gross sales of inventory and allowances	y, less returns					
		and allowances		a				
	b	Less cost of goods sole	d	b				<u> </u>
	С	Net income or (loss) fro	m sales of inv	entory			•	
		Miscellaneous Reven		Business Code		1		
	11 a			1				
	u					†		
	2			 		 		
	C							
		All other revenue				ļ		ļ
		Total. Add lines 11a-11		•				-
	12	Total revenue. See inst	ructions	•	1,824,420.	0.	0.	5.

Statement of Functional Expenses Part IX

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)

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	638,732.	638,732.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22			and the second	
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16			7,	
4	Benefits paid to or for members			,	ž ,
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			×.	<u></u>
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
	Fees for services (non-employees)				
	Management				
	Legal	1 040		1 040	
	: Accounting Lobbying	1,940.		1,940.	<u> </u>
	Professional fundraising services See Part IV, line 17			 	
	Investment management fees				······································
	Other				
	Advertising and promotion		·		<u> </u>
13	Office expenses				
14	Information technology		-		
15	Royalties				
16	Occupancy				
17	Travel	991.		991.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest		-4,		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization		 		
	Insurance	3,246.		3,246.	
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)				
	PRINTING AND PUBLICATIONS	635,881.	415,226.	6,750.	213,905.
	POSTAGE AND SHIPPING	288,216.	185,171.	7,654.	95,391.
	OPERATING EXPENSE	220,495.	195,305.	10,692.	14,498.
	FEES	219,058.	144,604.	**	74,454.
	PROGRAM EXPENSES	66,410.	66,410.	00 -01	
	All other expenses	103,056.	62,622.	22,531.	17,903.
	Total functional expenses. Add lines 1 through 24f	2,178,025.	1,708,070.	53,804.	416,151.
26	Joint costs. Check here ► X 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	1,223,974.	807,823.		416,151.
BAA			007,023.		Form 990 (2010)

: 4	1117	Dalance Silect							
		•	_	(A) Beginning of year		(B) End of year			
	1	Cash — non-interest-bearing		19,848.	1				
	2	Savings and temporary cash investments			2				
	3	Pledges and grants receivable, net			3				
	4	Accounts receivable, net		3,479.	4	8,852.			
	5	Passwahles from ourrent and former officers, director	e trustone kov omplovane	The state of the state of	10.7				
	5	Receivables from current and former officers, director and highest compensated employees. Complete Part			5				
	6	Receivables from other disqualified persons (as defining persons described in section 4958(c)(3)(B), and contributions organizations of section 501(c)(9) voluntary organizations (see instructions)	4	γ · · · · · · · · · · · · · · · · · · ·					
A	7	Notes and loans receivable, net		7					
S	8	Inventories for sale or use			8				
ASSETS	9	Prepaid expenses and deferred charges			9				
·		Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	No.	1				
	h	Less accumulated depreciation	10b		10 c				
		Investments — publicly traded securities	100		11				
	12	Investments — publicly traded securities Investments — other securities See Part IV, line 11			12	<u> </u>			
	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	24)	23,327.	16	8,852.			
	17	Accounts payable and accrued expenses	34)	223,368.	17	559, 969.			
	18	Grants payable	223,306.	18	339, 909.				
	19	Deferred revenue							
L				19					
A	20	Tax-exempt bond liabilities	V -4 C-11-1- D		20				
B	21	Escrow or custodial account liability Complete Part I	v or Schedule D		21				
LIAB-L-T-	22	Payables to current and former officers, directors, truinghest compensated employees, and disqualified per of Schedule L	stees, key employees, rsons Complete Part II	-	22				
Ē	23	Secured mortgages and notes payable to unrelated th	nird parties		23				
	24	Unsecured notes and loans payable to unrelated third	parties	·	24				
	25	Other liabilities. Complete Part X of Schedule D	·		25	2,529.			
	26	Total liabilities. Add lines 17 through 25		223,368.	26	562,498.			
NE T		Organizations that follow SFAS 117, check here ►	X and complete lines	,					
Ŧ		27 through 29 and lines 33 and 34.	_						
Ş	27	Unrestricted net assets		-200,041.	27	-553,646.			
SEITS	28	Temporarily restricted net assets			28				
	29	Permanently restricted net assets			29				
R		Organizations that do not follow SFAS 117, check he	ere ► and complete			,			
F		lines 30 through 34.			,	ا د			
E UZD	30	Capital stock or trust principal, or current funds			30				
	31	Paid-in or capital surplus, or land, building, or equipm	n or capital surplus, or land, building, or equipment fund						
Ê	32	Retained earnings, endowment, accumulated income,	}		32				
BALAZCES	33	Total net assets or fund balances		-200,041.	33	-553,646.			
Š	34	Total liabilities and net assets/fund balances	Ì	23,327.	34	8,852.			

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Form **990** (2010)

Form 990 (2010) WORLD CHANGERS INTERNATIONAL MINISTRIES 73	<u>3-1099319</u>		Page 12					
Part XI Reconciliation of Net Assets	-							
Check if Schedule O contains a response to any question in this Part XI								
·	1 1							
1 Total revenue (must equal Part VIII, column (A), line 12)	1	<u>1,824</u>						
2 Total expenses (must equal Part IX, column (A), line 25)								
3 Revenue less expenses Subtract line 2 from line 1								
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u>-200</u>	<u>,041.</u>					
5 Other changes in net assets or fund balances (explain in Schedule O)	5		<u>0.</u>					
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	-553	, 646 <u>.</u>					
Part XII Financial Statements and Reporting								
Check if Schedule O contains a response to any question in this Part XII	- 							
1 Accounting method used to prepare the Form 990 Cash X Accrual Other		Ye	s No					
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 line 2a or 2b, does the organization have a committee that assumes responsibility for oversight or review, or compilation of its financial statements and selection of an independent accountant?	of the audit,	2c	X					
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		TA 사관						
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is separate basis, consolidated basis, or both.	ssued on a		, ,					
X 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 t Audit Act and OMB Circular A-133?	he Single	3a	X					
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the ror audits, explain why in Schedule O and describe any steps taken to undergo such audits.	equired audit	3ь						
BAA		Form 99	0 (2010)					

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

WORLD CHANGERS INTERNATIONAL MINISTRIES DBA NATIVE AMERICAN CHILDREN'S FUND

Employer identification number 73-1099319

<u>Part</u>	Ĺ	Reason for Publ	ic Charity Status	(All organizations	must o	comple	te this	part.)	See ir	nstruct	ions.			
he o	rgai	nization is not a priva	te foundation becaus	e it is (For lines 1 thro	ugh 11,	check o	nly one	box)						
1		A church, convention	of churches or assoc	ciation of churches desc	cribed in	section	170(b)	(1)(A)(i)						
2	П	A school described in	section 170(b)(1)(A)	(ii). (Attach Schedule E	Ξ.)									
3	П	A hospital or a coope	erative hospital servic	e organization describe	d in sec	tion 170)(b)(1)(A)(iii).						
4	П	A medical research o	rganization operated	in conjunction with a h	ospital o	describe	d in sec	tion 17	0(b)(1)(A	()(iii) Er	nter the hos	pital's	;	
	_	name, city, and state										•		
5		An organization opera 170(b)(1)(A)(iv). (Cor	ated for the benefit o mplete Part II.)	f a college or university	owned	or oper	ated by	a gover	nmental	unit des	scribed in s	ectio	n	
6 7		An organization that	normally receives a s	government or governmental unit described in section 170(bX1XAXv). mally receives a substantial part of its support from a governmental unit or from the general public described i). (Complete Part II)										
8	Ш	A community trust de	escribed in section 17	70(b)(1)(A)(vi). (Complet	te Part I	1)								
9	X	from activities related	d to its exempt function and unrelated business) more than 33-1/3% of ons – subject to certair s taxable income (less mplete Part III)	n except	ions, an	d (2) na	more t	han 33-	1/3% of	its support	from	aross	
10		An organization orga	nized and operated e	exclusively to test for pu	iblic safe	ety See	section	509(a)	(4).					
11		An organization organ more publicly support describes the type of	nized and operated e ted organizations des supporting organizat	exclusively for the benef scribed in section 509(a tion and complete lines	fit of, to)(1) or s 11e thre	perform section 5 ough 111	the fun 09(a)(2)	ctions o	of, or car section 5	rry out th 5 09(a)(3)	ne purpose: . Check th	s of or e box	ne or that	
		a Type I	b Type II	c Type III						d \square	Type III -			
е		By checking this box, other than foundation section 509(a)(2)	, I certify that the org n managers and other	anization is not controll r than one or more pub	ed direct	tly or in ported o	directly organiza	by one tions de	or more escribed	disquali in section	ified persor on 509(a)(1	ns) or		
f														
g		Since August 17, 200	06, has the organizati	on accepted any gift of	r contrib	ution fro	m any	of the fo	ollowing	persons	,?			
												Yes	No	
		(i) A person who debelow, the gove	firectly or indirectly co erning body of the sup	ontrols, either alone or pported organization?	togethei	r with pe	rsons d	escribe	d ın (ıı) a	and (III)	11 g (i)			
		(ii) A family member	er of a person descril	bed ın (ı) above?							11 g (ii)			
		(iii) A 35% controlle	ed entity of a person	described in (i) or (ii) a	bove?						11 g (iii)			
h		Provide the following	information about th	e supported organization	n(s)									
		(i) Name of supported organization	(II) EIN	(in) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiz column (your go	Is the vation in i) listed in overning ment?	(v) Did y the organ columi your su	ızatıon in 1 (ı) of	(vi) !s organiza colun organiza U S	ation in	(vii) Amoun	t of sup	port	
					Yes	No	Yes	No	Yes	No				
<u>A)</u>					ļ									
D)														
B)										 				
C)				-										
D)														
E)														
r_#-*			• ~					ALTON CO. CO.	pière marie	the down are as				

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010 WORLD CHANGERS INTERNATIONAL MINISTRIES 73-1099319 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)

Sec	tion A. Public Support						
	ndar year (or fiscal year nning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include 'unusual grants')		-				
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf			-			-
3	The value of services or facilities furnished by a governmental unit to the organization without charge.						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).	- , , - , , , , , , , , , , , , , , , ,					
6	Public support. Subtract line 5 from line 4	,			-		
Sec	tion B. Total Support	-			·	'	
	ndar year (or fiscal year nning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV).						
11	Total support. Add lines 7 through 10	`					
12	Gross receipts from related activ	ities, etc (see ins	tructions)			1:	2
	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						
	tion C. Computation of Pul					· · · · · · · · · · · · · · · · · · ·	
	Public support percentage for 20		•	ne 11, column (f))	1.	·
	15 Public support percentage from 2009 Schedule A, Part II, line 14						
16a 33-1/3% support test — 2010. If the organization did not check the box on line 13, and the 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							
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance:	s' test, check this	box and stop he	re. Explain in P	Part IV how
t	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstances test The organiz	s' test, check this ation qualifies as	box and stop he a publicly suppor	re. Explain in P rted organizatio	Part IV how the pn ►
18 BAA	Private foundation. If the organi	zation did not che	eck a box on line	13, 16a, 16b, 17a			n 990 or 990-EZ) 2010

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.)

Sec	tion A. Public Support		· · · · · · · · · · · · · · · · · · ·				-
Calen	dar year (or fiscal yr 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')	131,878.	128,812.	19,354.		1,185,683.	1,971,034.
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						0.
	Gross receipts from activities that are not an unrelated trade or business under section 513						0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6	Total. Add lines 1 through 5	131,878.	128,812.	19,354.	505,307.	1,185,683.	1,971,034.
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
t	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	0.	0.	0.	0.	0.	0.
	: Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
	Public support (Subtract line	# 	: 1	1 1/1 1			<u> </u>
	7c from line 6)			A STATE OF THE STA	The the same of	The state of the state of	1,971,034.
	tion B. Total Support	430000	41.0007	4 > 0000	4 5 0000		
	dar year (or fiscal yr beginning ın)►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from	131,878.	128,812.	19,354.	505,307.	1,185,683.	1,971,034.
t	similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.		1,364.	6.		5.	<u>1,375.</u> 0.
	: Add lines 10a and 10b	0.	1,364.	6.	0.	5.	1,375.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0.
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV).						0.
13	Total support. (Add Ins 9, 10c, 11, and 12)	131,878.	130,176.	19,360.	505,307.	1,185,688.	1,972,409.
14	First five years. If the Form 990	is for the organiza				··	
500	organization, check this box and tion C. Computation of Pul		ercentage				
				- 13l (O)		125	00 0 %
15	· · · · · · · · · · · · · · · · · · ·	•		e 13, column (f))		15	99.9 %
_	Public support percentage from 2					16	99.9 %
	tion D. Computation of Inv			·			
17	Investment income percentage for			-	mn (f))	17	0.1 %
18	Investment income percentage fr						0.1 %
	33-1/3% support tests — 2010. If is not more than 33-1/3%, check	this box and sto	here . The organ	ization qualifies a	as a publicly supp	orted organization	• <u>X</u>
	33-1/3% support tests — 2009. If	ule organization	aid Hot check a p	ox on tine 14 of t	ilie iba, and line	io is more than 3	3-1/3%, and [
	line 18 is not more than 33-1/3%	o, cneck this box a	and stop here. The	e organization qu	alifies as a public	ly supported orgai	nization 🏲 📙

Schedule A	(Form 990 or 990-EZ) 2010 V	ORLD CHANGERS INT	ERNATIONAL MINISTRIE	S /3-1099319 Page 4
<u> Partly </u> 	Supplemental Information Part II, line 17a or 17b; ar (See instructions).	n. Complete this part to nd Part III, line 12. Also	o provide the explanations of complete this part for an	required by Part II, line 10; by additional information.
		·		
	·			
				·
			·	
		·		

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions.

WORLD CHANGERS INTERNATIONAL MINISTRIES 73-1099319 DBA NATIVE AMERICAN CHILDREN'S FUND Partial Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? No Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? No Ranill Conservation Easements. Complete if the organization answered 'Yes' to Form 990. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) **2**c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Partill Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X >\$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 **⊳**\$ b Assets included in Form 990, Part X ▶\$

Schedule D (Form 990) 2010 WORLI					73-109			Page 2
Part III Organizations Mainta								
3 Using the organization's acquisitive items (check all that apply)	on, accession	n, and of	her records, ch	eck any of the followi	ng that are a significant	use of it	s collec	tion
a Public exhibition			⊢	or exchange programs	s			
b Scholarly research			e U Other		·			
c Preservation for future gener								
4 Provide a description of the organization of the organization of the organization of the organization of the organization.5 During the year, did the organization of the organization of the organization of the organization.						se in		
5 During the year, did the organiza assets to be sold to raise funds r	ather than to	be mair	itained as part (of the organization's o	, or other similar collection?	Yes	ſ	No
Pärt IV Escrow and Custodia 9, or reported an amo	I Arrangen	nents.	Complete if o	organization answ		990, P	art IV,	line
1 a Is the organization an agent, trus included on Form 990, Part X?	stee, custodia	n, or oth	er intermediary	for contributions or c	other assets not	Yes	[No
b If 'Yes,' explain the arrangement	in Part XIV a	and com	olete the followi	ng table				
						Amoun	t	
c Beginning balance					1c			
d Additions during the year					1d			
e Distributions during the year					1 e			
f Ending balance					1f	П	-	
2a Did the organization include an a		rm 990,	Part X, line 217			Yes		No
b If 'Yes,' explain the arrangement		bo ora	anization and	wared Weel to Fe	000 Dest IV Ive	- 10		
Part V Endowment Funds. Co						T	F	
1 a Dogumena of way halance	(a) Current	year	(b) Prior year	(c) Two years ba	ack (d) Three years back	1	Four year	s back
1 a Beginning of year balance b Contributions						- F ²⁰ 1 -		,
b Contributions					A and a second	4,21	1 - ·	:
c Net investment earnings, gains, and losses						(1)	.5	
d Grants or scholarships				·····			# 19	
e Other expenditures for facilities					* * * * * * * * * * * * * * * * * * * *	r. 7	7.4	
and programs								Į.
f Administrative expenses							. **	
g End of year balance							٠ ٤	1
2 Provide the estimated percentag	e of the year	end bala	ince held as					
a Board designated or quasi-endown	vment ►		8					
b Permanent endowment ▶	%							
c Term endowment ►	%							
3a Are there endowment funds not	in the posses	sion of t	he organization	that are held and adr	ministered for the			
organization by	·		•				Yes	No
(i) unrelated organizations			•			3a(i)		
(ii) related organizations						3a(ii)		ļ
b If 'Yes' to 3a(II), are the related of	-		•			3b		L
4 Describe in Part XIV the intender								
Part VI Land, Buildings, and					1			
Description of investment	:		or other basis vestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d)	Book va	alue ————
1 a Land	'	<u> </u>			-			
b Buildings		<u> </u>						
c Leasehold improvements					+			
d Equipment		-			+			
e Other	n (d) mint =:	L	m 000 Part V a	nolumn (D) In- 10(1)				
Total. Add lines 1a through 1e (Columbia)	ii (u) inust ec	juai Forr	ii 330, Mart X, C	oiumii (b), iine 10(c)		dula D (- Orm Of	0.
					ocne	Jule D (f	לל וזווט	90) 2010

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Total. (Column (b) must equal Form 990, Part X, column (B) line 25)

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

(7) (8) (9) (10) (11)

Sche	edule D (Form 990) 2010 WORLD CHANGERS INTERNATIONAL MINISTRIES	73-10993	319	Page 4
Pái	t:XI № Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements			
1	Total revenue (Form 990, Part VIII,column (A), line 12)		1,824,	420.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2,178,	
3	Excess or (deficit) for the year Subtract line 2 from line 1		-353,	
4	Net unrealized gains (losses) on investments			
5	Donated services and use of facilities		-	
6	Investment expenses			
7	Prior period adjustments	•		
8	Other (Describe in Part XIV)			
9	Total adjustments (net) Add lines 4 through 8	 		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	 	- 252	605
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Peturn	-353,	605.
	Total revenue, gains, and other support per audited financial statements	Return	1 024	420
7	Amounts included on line 1 but not on Form 990, Part VIII, line 12		1,824,	420.
		[
	Net unrealized gains on investments 2a	→ `l		
	Donated services and use of facilities 2b	-* *		
	Recoveries of prior year grants			
	Other (Describe in Part XIV)			
•	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3	1,824,	420.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		-	
ā	Investments expenses not included on Form 990, Part VIII, line 7b	1		
t	Other (Describe in Part XIV.)	٠, ١		
(: Add lines 4a and 4b .	4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,824,	420.
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return		
1	Total expenses and losses per audited financial statements	1	2,178,	025.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
ä	Donated services and use of facilities 2a			
	Prior year adjustments 2b	─ -		
	COther losses 2c			
	Other (Describe in Part XIV.)			
	Add lines 2a through 2d			
_	Subtract line 2e from line 1	_2e	2 170	005
3	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	2,178,	025.
4.				
	Investments expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV)			
	Other (Describe in Part XIV) Add lines 4a and 4b			
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	4c 5	2,178,	025
	t XIV Supplemental Information		2,170,	025.
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also compadditional information	IV, lines 1b plete this part	and 2b, to provide	
	·			
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Schedule D (Form 990) 2010 WORLD CHANGERS INTERNATIONAL MINISTRIES	73-1099319	Page 5
PartXIV Supplemental Information (continued)		
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Schedule **D** (Form 990) 2010

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attatch to Form 990.

2010

OMB No 1545-0047

Internal Kevenue Service				•			marcham and a second
Name of the organization						Employer identification number,	ation number,
WORLD CHANGERS INTERNATIONAL MINISTRIES	L MINISTRIES					73-1099319	6.
Partin General Information on Grants and Assistance	ants and Assistance			:			
	s to substantiate the amount or grants or assistance?	of the grants	s or assistance, the g	of the grants or assistance, the grantees' eligibility for the grants or assistance, and	he grants or assistand	e, and	Yes X No
2 Describe in Part IV the organization's procedures for monitoring the	procedures for monitoring the	use of gran	use of grant funds in the United States	States			
Rating Grants and Other Assistance to Governments and	ce to Governments and	Organiza	itions in the Unit	Organizations in the United States. Complete if the organization answered 'Yes' to	te if the organizat	ion answered 'Ye	es' to
Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed	or any recipient that rec additional space is need	eived mor led	e tnan \$5,000. C	heck this box if no	one recipient rec	eived more than	\$5,000.
1 (a) Name and address of organization or government	(b) EIN (c) IRC section if applicable	section	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) FEED MY PEOPLE INTERNAT 11052 NORTH 24TH AVENUE PHOENIX, AZ 85029			0.	638,732.	FAIR MARKET VALUE	FRESH PRODUCE	FOOD BANK
(3)							
[4]							
<u></u>							
<u>ω</u>							
(8)							
2 Enter total number of section 501(c)(3) and government organizations	and government organization	- Sr				•	1

Schedule I (Form 990) 2010

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BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

3 Enter total number of other organizations

Page 2 **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (f) Description of non-cash assistance **Parally Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information. 73-1099319 (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance WORLD CHANGERS INTERNATIONAL MINISTRIES (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) 2010 [Park][[] m 4 S 9

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Schedule I (Form 990) 2010

SCHEDULE M (Form 990)

Noncash Contributions

20

ZUIU

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Employer identification number 73–1099319

Name of the organization WORLD CHANGERS INTERNATIONAL MINISTRIES DBA NATIVE AMERICAN CHILDREN'S FUND

Par	ttl⊠ Types of Property				
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art				
2	Art—Historical treasures				
3	Art-Fractional interests				
4	Books and publications		・ 野田 野田 かいい		
5	Clothing and household goods		[數學學] 由1		
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property .				
9	Securities—Publicly traded				
10	Securities-Closely held stock				
11	Securities-Partnership, LLC, or trust interests				
12	Securities-Miscellaneous				
13	Qualified conservation contribution— Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential				
16	Real estate-Commercial				
17	Real estate-Other	·			
18	Collectibles				
19	Food inventory	X	1	638,732.	FMV
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts.				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ► ()				
26	Other ► ()				
27	Other ► ()				
28	Other ► (
29	Number of Forms 8283 received by the organization completed Form 8283, Part IV, Done	ion during the ee Acknowle	e tax year for contribut dgement	tions for which the	29
					Yes No
30 a	a During the year, did the organization receive by chold for at least three years from the date of the purposes for the entire holding period?	contribution a initial contrib	any property reported in oution, and which is no	n Part I, lines 1-28 that t required to be used fo	it must or exempt 30 a X

b If 'Yes,' describe the arrangement in Part II

30a During the year, did the organization receive by contribution any property reported in Part I, lines I-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If 'Yes,' describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a X

b If 'Yes,' describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

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describe in Part II

Schedule M (Form 990) 2010

Schedule	M (Form 9	90) 2010	WORLD	CHANGERS	INTERNATIONAL	MINISTRIES	73-1099319	Page 2
	Supplem and 33.	nental In Also cor	iformation	on. Completens part for a	e this part to prov iny additional info	ride the information rmation.	on required by Part I, lines 30b	, 32b,
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Schedule M (Form 990) 2010

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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047

2010

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Name of the organization WORLD CHANGERS INTERNATIONAL MINISTRIES DBA NATIVE AMERICAN CHILDREN'S FUND	Employer identification number 73-1099319
FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS	
WILLAM T. JEFFERS SR. AND WILLIAM T. JEFFERS JR. ARE FATHER AND	
FORM 990, PART VI, LINE 8 - EXPLANATION OF NO CONTEMPORANEOUSLY DOC	UMENTATION OF MEETINGS
MINUTES OF BOARD OF DIRECTORS MEETINGS ARE PRINTED, APPROVED A	ND_SIGNED
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
THE ENTIRE BOARD DID NOT REVIEW THE FORM 990 BEFORE IT WAS FILE	ED. IT WAS REVIEWED
BY A BOARD MEMBER.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	/AILABLE
DOCUMENTS ARE MADE AVAILABLE UPON WRITTEN REQUEST.	