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### **Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047 2010

Open to Public

Depa	etment of nad Reven	the Treasury ue Service	► The organization may	have to use a cor	ov of this return to	o satisfy sta	ate repor	tina reauire	ements.	Inspect	ion
Ā	For the	2010 cale	ndar year, or tax year begin	_		2010, and e		Decem		, 20 10	
В	Check if	applicable:	C Name of organization Citych							er identification n	umber
	Address		Doing Business As				·			90-003224	
	Name ct									ne number	
	initial ret	um	205 S. Polk St.							806-371-0089	
	Terminat	ted	City or town, state or country,	and ZIP + 4							
	Amende	d return	Amarillo, TX 79101-1424						G Gross re	eceipts \$ 1,	617,257
	Applicati	on pending	F Name and address of princip	al officer Donnie	Lane, Jr.	,		H(a) is thas a	group return	for affiliates? Yes	✓ No
			2505 S. Bolton St., Amarillo	, TX 79103				H(b) Are al	affiliates in	nctuded? 🔲 Yes	√ No
	Tax-exe	mpt status.	✓ 501(c)(3)	501(c)( ) ◀ (in:	sert no.) 4947(a	a)(1) or [ 5	527	If "No	," attach a	list. (see instruction	າຣ)
J	Websit	e: Nw	w.cltychurchamarillo.com					H(c) Group	exemption	number 🕨	
K	Form of a	organization:	✓ Corporation ☐ Trust ☐ A	ssociation [] Other	<b>&gt;</b>	L Year of	formation	: 2000	M State	of legal domicile	TX
P	art I	Summ	ary								
	1	Briefly de	scribe the organization's	mission or most	significant activ	vities: W	e are co	mmltted t	o the prin	ciple that God	
•		has a pui	rpose for every child regard	less of their geog	graphical location	n, financia	al status,	, religious	affiliation	1,	
Ę		race or c	ulture. We are committed to	transforming th	e disadvantaged	d neighbor	hoods o	f our city	by making	g	
Activities & Governance		a commit	ment to children.								
Š	2	Check th	is box $ ightharpoonup \square$ if the organization	discontinued its ope	rations or disposed	of more than	n 25% of it	s net assets.	٠		
o a	3	Number of	of voting members of the	governing body	(Part VI, line 1a	)			3		7
8	4		of independent voting mei	-	• • •		-		4		5
₹	5	Total nun	nber of individuals employ	ed in calendar y	ear 2010 (Part '	V, line 2a)			5		31
2	6		nber of volunteers (estima						6		870
•	7a		elated business revenue fi			2			7a		113
	b	Net unrel	ated business taxable inc	ome from Form	990-T, line 34	<u></u>	<del></del>		7b		
				D	-0		<u> </u>	Prior Yes	er	Current Ye	er
ę	8		tions and grants (Part VIII,	line (h) H.	CEIVE	) · 1	·	1,	486,753	1,	617,057
Revenue	9		service revenue (Part VIII,	1110 49h			·				
ě	10	Investme	nt income (Part VIII, colun	nn (A), lines 3, 4,	and 7d)	S	·		580		<u>87</u>
_	11	Other rev	venue (Part VIII, column (A	), lines 5, 6d, 86,	19c,[1gc, and]1	1e)  O	∴		111	<del></del>	113
	12		enue-add lines 8 through			(A)  (ID)  12	2)	1,	487,444	1,	617,257
	13		nd similar amounts paid (F	1 (11-1	'	<del>-</del>	·		4,393		11,694
	14		paid to or for members (Paid								
8	15		other compensation, emplo	667,791		778,440					
Expenses	16a		onal fundraising fees (Part				•			·	
	_ b		draising expenses (Part IX						204 205		770 744
_	17		penses (Part IX, column (A	-	•	· · · ·	·		821,285		778,711
	18	-	enses. Add lines 13-17 (n	•		•	. ⊢	1,	493,469	Τ,	568,845
- 9	19	nevenue	less expenses. Subtract I	me to troin time	12		Reci	nning of Cur	(6,025)	End of Yea	48,412
25 P	20	Total and	ets (Part X, line 16)				303		996,636		
28	21		ilities (Part X, line 16)				·		93,657	· · · · · · · · · · · · · · · · · · ·	071,946 120,555
Net Assets Fund Balanc	22		ts or fund <del>balance</del> s. Subtr	act line 21 from	ine 20		` ├─		902,979		951,391
	art II		ture Block	dot iiilo 21 iioiii		· · ·	<u>·                                      </u>		302,373		301,031
			ry, I declare that I paye examined	this return including	accompanying sc	hadules and	statemen	ts and to th	e hest of m	v knowledge and	helief it is
			ete. Declaration of preparer (othe							iy will will be a will a will be a w	Delioi, it is
			~//	•					5/8	2/11	
Sig	n	Sign	ature of officer					Dat	<del>, / "</del>	+	
He		1	DAINTE F 1K	WE - SIM	C. EXE	· cuti	UF T	Tio.			
		标	or print name and title	-119	1			<u> </u>			
Pa	id	Print/Ty	pe preparer's name	Preparer's sig	nature		Date		Check [	T # PTIN	
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	epare e On!		ame >				-	Firm	s EIN ▶		
US	e VIII	יי,	ddress ▶	· · · · · · · · · · · · · · · · · · ·			_		ie no.		
Ma	y the IF		s this return with the prepa	arer shown abov	e? (see instruc	tions) .	<u> </u>		·•	<u></u> Ye:	s 🗌 No
For	Paper	vork Redu	ction Act Notice, see the se	parate instruction	ns.	(	Cat. No 1	1282Y			90 (2010)

FUM CA	90 (2010)		Deer 4
Part	Statement of Program Service Accomplishments		Page
	Check if Schedule O contains a response to any question in this Part III	• • •	· [>
1	Briefly describe the organization's mission:		
	We are committed to the principle that God has a purpose for every child regardless of their geographical location, financial status, religious affiliation, race or culture. We are committed to transforming the		
	disadvantaged neighborhoods of our city by making a commitment to children.		
	and the same of th		
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, and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants a others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code: ) (Expenses \$ 270,647 including grants of \$ ) (Revenue \$	304,664	)
	King's Academy is an early education center committed to a strong Biblical education. Students are given a tuition	free	_
	Christian education. At Kings Academy, students receive a broad spectrum of fun and educational opportunities		
	including music, art, physical education, and field trips. King's Academy will give young minds a jump start to readi	ng	
	and continuing their educational journey.		
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
4b	(Code: ) (Expenses \$ 231,030 including grants of \$ ) (Revenue \$	351,251	)
	Fill a bag, feed a child. At the CityKid Cafe volunteers prepare and deliver to the neighborhoods of Amarillo.		• ′
	Over 1000 lunches a day Monday through Thursday. Volunteers and Citychurch staff prepare each lunch. The		
	lunches consist of a hot item, fruit, cookies, and popcorn. The bags are loaded into six different trailers and		
	delivered to the neighborhoods that Citychurch ministers in. The lunch is usually met with a smile and excitement		
	from the child who receives it. The children who receive the lunch begin to look forward to it and depend on it.		
	Citychurch also host summer mission groups. Each year Citychurch hosts over 700 missionaries and volunteers		
	who come here to learn about ministry to the inner-city. Lunches are also fed during spring break and some		
	school holidays. CityKid Cafe helps facilitate the Snack Pak 4 Kids Ministry that gives school age students a		
	backpack full of food for the weekend.	~	
	~~~		
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
40	(Code:) (Expenses \$ 216,381 including grants of \$) (Revenue \$	112,591	_ )
4c	Citychurch has a sunday worship service for children and families. Vans pick children up for breakfast and		
40			
40	a children's service and youth service. Groceries are given away to families in attendance and sent home with		
40	children who attend. Durning the summer, Citychurch hosts the Jesus Loves You Celebration. It is a citywide		
40	***************************************		
**	children who attend. Durning the summer, Citychurch hosts the Jesus Loves You Celebration. It is a citywide		

	***************************************		
	*************************************		
4d	Other program services. (Describe in Schedule O.)		
	(Expanses \$ 540.457 including grants of \$	\ (Revenue \$	040 554 \

Part	IV Checklist of Required Schedules			Ligo C
			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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	1	
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		1
4	<b>Section 501(c)(3) organizations.</b> 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		1
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			<b>√</b>
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.	5 6		1
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			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	7		<b>✓</b>
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		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.	10		•
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
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		1
С	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		<b>▼</b>
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		1
0	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X	11e	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	11f		1
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>√</b>
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
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		1
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		1
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		1
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		1
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		1
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part	Checklist of Required Schedules (continued)			- 0
			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		1
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	<b>\</b>	
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		1
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		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		1
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		1
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		<b>√</b>
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	<b>√</b>	
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		1
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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		1
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		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		1
а	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			
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		1
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,			,
38	Part VI	37	✓.	<b>✓</b>
			~~~	

Part	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   14			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			ŀ
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	1	
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 30			
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		1
	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			١,
	account)?	4a		<b>✓</b>
Ь	If "Yes," enter the name of the foreign country: ► N/A			
	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>√</b>
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	_		١,
	organization solicit any contributions that were not tax deductible?	6a		<b>/</b>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	7a		1
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<b>-</b>
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70		
·	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	-,0		· ·
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		7
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
ĥ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			<u> </u>
	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		1
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	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 Schedule O.			ļ
þ	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			
C	Enter the amount of reserves on hand			<del> </del>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<b>✓</b>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b	i	I

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b b "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change			
	O. See instructions.	00 111	COM	,00,0
	Check if Schedule O contains a response to any question in this Part VI		<u>.</u>	. 🗸
Secti	on A. Governing Body and Management			
_			Yes	No
18	Enter the number of voting members of the governing body at the end of the tax year 1a 7			
ь 2	Enter the number of voting members included in line 1a, above, who are independent .   1b 5  Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1 1		
_	any other officer, director, trustee, or key employee?	2	1	
3	Did the organization delegate control over management duties customarily performed by or under the direct	-	•	<u> </u>
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		<b>/</b>
6 7a	Does the organization have members or stockholders?	6		<b>✓</b>
74	of the governing body?	7a		1
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		7
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	1	ا
b	Each committee with authority to act on behalf of the governing body?	8b	<b>✓</b>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
Casti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		_
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		1
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		<u> </u>
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			İ
	form?	11a	<b>/</b>	<del></del>
b 12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	120	<b>-</b>	<del> </del>
	rise to conflicts?	12b	1	İ
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		<b>√</b>
13	Does the organization have a written whistleblower policy?	13	<b>  </b>	<b>/</b>
14 15	Does the organization have a written document retention and destruction policy?	14		<b>✓</b>
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		1
þ	Other officers or key employees of the organization	15b		<b>✓</b>
46-	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		1
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its	102		<b> </b>
_	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		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed   none  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3 for public inspection. Indicate how you make these available. Check all that apply.	)s only	y) ava	ilable
	☐ 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	of inter	rest p	olicy,
	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 organization: ▶ Diana Lane, 205 S. Polk St., Amarillo, TX 79101, (806) 371-0089	of the	1	

Form	999	(201	O١
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Page	- 4

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- 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 n	(B)	<u>- 5.9</u>			C)	po		(D)	(E)	(F)
Name and Title	Average	Posit	Position (check all that apply)					Reportable	Reportable	Estimated
	hours per week (describe hours for related organizations in Schedule O)	individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) Bill Duncan										
7 Churchwell Dr., Bentonville, AK 72712		✓	_	✓			<u> </u>			
(2) Donnie Lane, Jr.	30	_		١.		l		47,902	23,649	
2505 S. Bolton St., Amarillo, TX 79103		1		✓	L.	ļ	ļ	,	20,010	
(3) Diana Lane	40	_ ا		١.	١.	İ		66,890		
205 S. Polk, Amarillo, TX 79101		1		✓	✓		_		ļ	
(4) Kelly Wood		١.		١.			ł			
6505 Knollwood Dr., McKinney, TX 75070		<b>✓</b>		✓	_		<u> </u>	<u> </u>		
(5) Charles Davenport		_ ا								
301 Buffalo, Tulia, TX 79088		<b>/</b>	_	ļ	_		<u> </u>			
(6) Greg Lusk	9	_ ا								
4511 SW 3rd, Amarillo, TX 79106		<b>✓</b>	$ldsymbol{f eta}$		_	ـــــ				
(7) Dawnette Lusk	20				ŀ	ĺ		2,730		
4511 SW 3rd, Amarillo, TX 79106		/			<u> </u>		<u> </u>			
(8)								:		
(9)										
(10)										
(11)	_									<del></del>
(12)										
(13)	_		-							
(14)										
(15)	_									
(16)				-				-		

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A)	(B) (C)							(D)	(E)			(F)	-
	Name and title	Average	Posit	sition (check all that a			that ap	ply)	Reportable	Reportable			mated	
		hours per week	약중	2	오	\$	육품	₽	compensation	compensation from related			ount of ther	
		(describe	류	를	Officer	ğ	ples	Former	the	organizations		comp	ensatio	n
		hours for related	Individual trustee or director	Institutional trustee		Key employee	8 8	l .	organization (W-2/1099-MISC)	(W-2/1099-MISC	"		m the nzatior	n
		organizations	Tag.	쿨		8	<b>a</b>		(** = *********************************	}	1	and	related	l
		in Schedule O)	8	86			Highest compensated employee				1	organ	zation	S
	·····	<u> </u>	}—		<u> </u>	<u> </u>	ă.	_			+-	<u> </u>	<u> </u>	
<u>(17)</u>		ł					-							
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(19)			1			<del>                                     </del>	<b></b>	┢			$\top$			
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(20)											$\top$			
(21)														
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(23)		ł	1											
(24)		<del> </del>	<del> </del> -	ļ		<b></b>					+			
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(25)						$\vdash$	$\vdash$	T			+			
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(28)		1												
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1b	Sub-total						•		117,522	23,6	19			
9	Total from continuation sheets to Part				•				117,522	23,64	10			
<u>d</u>	Total (add lines 1b and 1c)									L				<del>- 1</del>
_	reportable compensation from the organi			1056	9 1151	. <del></del>	anove	<del>2)</del> W	WO Jecewed III	ore man \$100,	UUU II	11		
	<u> </u>												Yes	No
3	Did the organization list any former of	fficer, direc	ctor o	r tr	uste	ю,	key e	emp	oloyee, or high	est compens	ated			
	employee on line 1a? If "Yes," complete											3		1
4	For any individual listed on line 1a, is the	sum of re	porta	ble	con	pe	nsatio	n a	ınd other comp	ensation from	the			
	organization and related organizations	greater th	an \$	150,	,000	? t	f "Ye	s, "	complete Sch	edule J for s	uch			
	individual			٠	•		•			· · · · ·	•	4		1
5	Did any person listed on line 1a receive of										dual			
	for services rendered to the organization	? IT "Yes," (	compi	ete	Scr	neau	JIO J T	ors	sucn person	<del></del>	<u>·</u>	5		<b>✓</b>
	on B. Independent Contractors		od in	do-	d				are that reachy	d mara than 9	100 (	200 06		
1	Complete this table for your five highest compensation from the organization.	compensat	ea inc	gep	ena	ent	contr	act	ors that receive	a more than t	,100,0	JUU OT		
								r -	(D)	<del></del>		<u>/////</u>		
	(A) Name and business add	ress						ł	(B) Description of s	ervices	C	(C) ompens	ation	
N/A	· · · · · · · · · · · · · · · · · · ·					-		<del>                                     </del>						
	· · · · · · · · · · · · · · · · · · ·							_						
										<del></del>				
								Г						
2	Total number of independent contractor								nose listed ab	ove) who				
	received more than \$100,000 in compens	sation from	the o	rgar	niza	tion	<b>▶</b> 0							
												_	000	(2010)

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
ats ts	1a	Federated campaigns 1	а				
Contributions, gifts, grants and other similar amounts	b	Membership dues	b				
3,8	С	Fundraising events	С				
a g	d	Related organizations 1	d				
ž Ë	е	,	е				
를 높	f	All other contributions, gifts, grants,					
출 첫		<u> </u>	lf 1,617,057				
5 5	g	Noncash contributions included in lines 1a-1f:					
	h	Total. Add lines 1a-1f		1,617,057			
Program Service Revenue			Business Code				···
8	2a						
92.	Ь						
ž	C						
8	d		·		······································		
Tal.	8	All other present and in account					
ğ	f g	All other program service revenue <b>Total.</b> Add lines 2a–2f					
	3	Investment income (including di	vidends, interest.				· · · · · · · · · · · · · · · · · · ·
				87	87		
	4	Income from investment of tax-exemp	t bond proceeds ▶				<del></del>
	5	Royalties				· · · ·	
		(i) Real	(ii) Personal			<del></del>	
	6a	Gross Rents					
	b	Less: rental expenses		•			
	С	Rental income or (loss)					
	d	\					
	7a	Gross amount from sales of (i) Securities	(ii) Other			·	
		assets other than inventory					
ì	Ь	Less: cost or other basis	<u> </u>	:			
		and sales expenses .					
	C	Gain or (loss)					
	d	Net gain or (loss)	· <u> </u>		<del> </del>		
Φ	0.	Gross income from fundraising	İ				
ŭ	8a	events (not including \$					
Revenue		of contributions reported on line 1c).					ļ
<b>-</b>		See Part IV, line 18					
Othe	ь	Less: direct expenses	b				
0	_	Net income or (loss) from fundraisi	<del></del>				
		Gross income from gaming activities		,	• • •		
		See Part IV, line 19	а				
	b	Less: direct expenses	b				
	С	Net income or (loss) from gaming a					
	10a	Gross sales of inventory, les					
		returns and allowances					
	b	Less: cost of goods sold					
	С	Net income or (loss) from sales of Miscellaneous Revenue	nventory ►  Business Code				
	44-					<u>-</u>	<u> </u>
		Vending Income	900003	113		113	· · · · · · · · · · · · · · · · · · ·
	b		-			-	
	d	All other revenue		· · · · · · · · · · · · · · · · · · ·			<del></del>
	9	Total. Add lines 11a-11d		113			
	12	Total revenue. See instructions.		1,617,257	87	113	

### Part IX Statement of Functional Expenses

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

	All other organizations must complete coll not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	11,694	11,694		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
<b>4</b> <b>5</b>	Benefits paid to or for members	114,792	54,515	51,333	8,944
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	543,151	424,000	101,266	17,885
9	Other employee benefits	89,949	65,420	20,859	3,670
10	Payroll taxes	30,548	22,218	7,084	1,246
11	Fees for services (non-employees):				
а	Management				<del></del>
b	Legal				
C	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				· · · · · · · · · · · · · · · · · · ·
13	Office expenses	10,997		10,997	
14	Information technology				
15	Royalties				
16	Occupancy	9,200	9,200	0.005	
17 18	Travel	6,158	3,473	2,685	
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates		· · · · · · · · · · · · · · · · · · ·		
22	Depreciation, depletion, and amortization .	96,730	80,377	8,407	7,946
23	Insurance	35,807	35,807		
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24f. If	į			
	line 24f amount exceeds 10% of line 25, column		ļ	İ	
	(A) amount, list line 24f expenses on Schedule O.)				
а	Schedule O	619,819	551,811	46,911	21,097
b					
C					
d					
0	All about an area				<del></del>
f	All other expenses	4 500 045	4 050 545	040.540	
25	Total functional expenses. Add lines 1 through 24f	1,568,845	1,258,515	249,542	60,788
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** Beginning of year End of year 30.865 1 57,276 2 158,283 2 15,019 3 3 4 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsonng organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) . . . . . 6 Assets 7 3,500 7 3,500 8 Prepaid expenses and deferred charges . . . 9 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation . . . . 10b (575, 285)803,946 10c 996,109 Investments-publicly traded securities . . . . 11 42 11 Investments—other securities. See Part IV, line 11 . 12 12 13 Investments -- program-related. See Part IV, line 11 . . . . . . . . . 13 14 14 15 Other assets. See Part IV, line 11 . . . . . . . 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 996,636 16 1,071,946 Accounts payable and accrued expenses . . . . . . . . . 17 21,851 17 Grants payable . . . . . . . . . . . . . . . . . 18 18 19 19 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D . 21 Jabilities Payables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified persons. 22 50,000 23 Secured mortgages and notes payable to unrelated third parties . . . 67,194 23 60,513 24 Unsecured notes and loans payable to unrelated third parties . . . 24 25 Other liabilities. Complete Part X of Schedule D . . . . . . 25 10,042 4,612 Total liabilities. Add lines 17 through 25 . . . . . . 26 93,657 26 120,555 Organizations that follow SFAS 117, check here ▶ □ and complete Fund Balances lines 27 through 29, and lines 33 and 34. 27 798.586 27 950,742 28 104,393 28 29 29 Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 5 Capital stock or trust principal, or current funds . . . . . . . Assets 30 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 32 32 Retained earnings, endowment, accumulated income, or other funds . ž 33 Total net assets or fund balances . . . . . . . . . . . . . . . . . 902,979 33 951,391 34 Total liabilities and net assets/fund balances . . . . . . 996,636 34 1,071,946

	Pa	ge <b>12</b>
	 	<del></del>
	Yes	No
1		

Form 990 (2010)

Part	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)			
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))			
5	Other changes in net assets or fund balances (explain in Schedule O)			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,			
	column (B))			
Part	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		1
b	Were the organization's financial statements audited by an independent accountant?	2b		1
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?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
7-3	the Single Audit Act and OMB Circular A-133?	3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	<b>—</b>	<b></b>	<del>                                     </del>
-	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		For	n <b>99</b> 0	(2010)

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

Department of the Treasury Internal Revenue Service

Name of the organization

### **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

Open to Public Inspection
Employer identification number

		h Outreach Min								90-00			
	rt I	<del></del>		ity Status (All orga						nstructio	ns.		
Γhe	_		•	tion because it is: (Fo		_		-	-				
1		A church, conv	vention of church	nes, or association of	churches	describe	ed in <b>sec</b> t	tion 170	(b)(1)(A)(i	).			
2				170(b)(1)(A)(ii). (Attac									
3		A hospital or a	cooperative hos	spital service organiza	tion desc	ribed in s	section 1	70(b)(1)(	(A)(iii).				
4		A medical rese	earch organization	n operated in conjunc	ction with	a hospita	al describ	ed in se	ction 170	)(b)(1)(A)(	iii). Ente	r the	
			e, city, and state										
5			n operated for t )(1)(A)(iv). (Comp	the benefit of a collect plete Part II.)	ge or uni	versity ov	vned or o	operated	by a go	vernment	al unit d	lescrit	ed in
6		A federal, state	e, or local govern	nment or governmenta	al unit de	scribed in	section	170(b)(1	)(A)(v).				
7	_	•	•	receives a substantia (A)(vi). (Complete Par	•	its suppo	ort from a	govern	mental ur	it or from	the ge	neral	oublic
8		A community t	rust described in	n section 170(b)(1)(A)	( <b>vi).</b> (Con	nplete Pa	rt II.)						
9		-		receives: (1) more tha				m contri	butions.	members	hip fees	. and	aross
-				to its exempt functi									
				nt income and unrel									
				fter June 30, 1975. Se							,		
10		An organizatio	n organized and	operated exclusively	to test fo	r public s	afety. Se	e sectio	n 509(a)(	4).			
11		-	_	d operated exclusive							or to ca	ırv oı	ıt the
• •				licly supported organ									
				describes the type of									
		a 🗌 Type	ı <b>ь</b> □	Type II c	□ Tvp	e III-Fund	ctionally i	ntegrate	d	d [	Type	III-O	ther
•	. $\Box$			that the organization	_ ,.		•	~		or more o			
•				rs and other than one									
		or section 509	_					J					` ` ` `
f				written determination	n from t	he IRS t	hat it is	a Type	I. Type i	l. or Tvo	e III su	oporti	na
-		•	check this box .										ĬП
ç	3	•		ne organization accep	oted anv	aift or co	ontributio	n from a	nv of the	,			
•	•	following pers		io organization accor		<b>3</b> 4. 4.			,				
		٠.		ndirectly controls, eith	ner alone	or toget	her with I	oersons	describe	d in (ii) an	ıd	Yes	No
				ody of the supported of							11g(i	<del> </del>	<del> </del>
			•	on described in (i) abo	_						11g(i	+	┢──
		_	·	a person described in						• • •	11g(ii		<del> </del>
H			•	on about the supporte							1.184	4	Ь
			(ii) EIN	(iii) Type of organization	, <u> </u>	rganization		ou notify	6.01	- 45	Arin A	Amount	<del></del>
(t		e of supported ganization	(ii) E114	(described on lines 1–9		ted in your	the organ	ization in		s the zon in col.		upport	Oi
		•	ļ	above or IRC section	governing	document?		of your oort?		zed in the S?			
				(see instructions))	Yes	No	Yes	No	Yes	No			
							. 55						
(A)							,		1				
					<del> </del>				<del>                                     </del>	<del>                                     </del>			
(B)			1						1				
					-				<u> </u>		<u> </u>		
(C)													
					-								
			1	I	1	I	I	ł	i .				
(D)					i								
					<u> </u>				<u> </u>				
(D) (E)					<u> </u>								

Part	(Complete only if you checked the	e box on line	5, 7, or 8 of	Part I or if the	e organizatio	n failed to qua	
<u> </u>	Part III. If the organization fails to	qualify unde	r the tests lis	ted below, pl	ease comple	te Part III.)	
	on A. Public Support idar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						<del></del>
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	1,090,811	992,854	1,425,391	1,486,753	1,617,057	6,612,866
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1,090,811	992,854	1,425,391	1,486,753	1,617,057	6,612,866
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)						580,319
6	Public support. Subtract line 5 from line 4.						6,032,547
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2010	(f) Total
7	Amounts from line 4	1,090,811	992,854	1,425,391	1,486,753	1,617,057	6,612,866
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	690	4,091	1,126	580	97	C 574
9	Net income from unrelated business activities, whether or not the business is regularly carried on	690	4,091	1,120	560	87	6,574
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	382	293	297	111	113	1,196
11	Total support. Add lines 7 through 10	. <del>,,.</del>					6,620,636
12 13	Gross receipts from related activities, etc. First five years. If the Form 990 is for the	e organization	's first, second	d, third, fourth,	or fifth tax ye	12   ear as a section	6,619,440 n 501(c)(3)
Casti	organization, check this box and stop her				<del></del>	· · · · · ·	▶
14	on C. Computation of Public Suppor Public support percentage for 2010 (line 6			1 column (fl)		14	91 %
15 16a	Public support percentage from 2009 Sch 331,9% support test—2010. If the organize	nedule A, Part I	l, line 14 .			15	87 %
b	box and stop here. The organization qual 331/2% support test—2009. If the organ	ization did not	check a box	on line 13 or	16a, and line	15 is 331/3% (	or more,
	check this box and stop here. The organi	-					
17a	10%-facts-and-circumstances test – 20 10% or more, and if the organization meets Part IV how the organization meets the "facorganization	ets the "facts-a	ınd-circumstar mstances" tes	nces" test, che t. The organiza	ck this box an	d <b>stop here.</b> E	xplain in
b	10%-facts-and-circumstances test – 20 15 is 10% or more, and if the organizate Explain in Part IV how the organization m supported organization	ion meets the eets the "facts	"facts-and-cir -and-circumst	cumstances" ances" test. Ti	test, check th	is box and sto	and line op here.
18	Private foundation. If the organization die					k this box and s	see

### 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 u	nder Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)	

				- · · · , p · · · · · · · · · ·			
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2006	<b>(b)</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							
	received from disqualified persons .		1				
h	Amounts included on lines 2 and 3						_
	received from other than disqualified		1				
	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						<del></del>
8	Public support (Subtract line 7c from		i				
	line 6.)					'	
Secti	on B. Total Support	<u> </u>	4	<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>	
	dar year (or fiscal year beginning in)	(a) 2006	<b>(b)</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 .		l				
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses		1				
	acquired after June 30, 1975		i				
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 carned 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.)			<u> </u>			
14	First five years. If the Form 990 is for the	ne organization	n's first, secon	d, third, fourth	, or fifth tax y	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he		<del></del>	<u> </u>			<b>&gt;</b> 🔼
Secti	on C. Computation of Public Suppor			····		<u></u>	
15	Public support percentage for 2010 (line 8					15	<u> </u>
16	Public support percentage from 2009 Sch	<del></del>		<del></del>	<u></u>	16	<u> </u>
	on D. Computation of Investment In					1 : 1	<del></del>
17	Investment income percentage for 2010 (			-		17	%
18	Investment income percentage from 2009					18	<u>%</u>
19a	331x% support tests-2010. If the organ						
	17 is not more than 331/3%, check this box						
þ	331,5% support tests - 2009. If the organiz				•		-
	line 18 is not more than 331/3%, check this l		_				
20	Private foundation. If the organization di	d not check a	box on line 14	. 19a. or 19b. o	check this box	and see instru	ctions 🕨 🗂

OCHOUSE A (I	omi 990 dr 990-E2J 2010	Page 4
Part IV	<b>Supplemental Information.</b> 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).	
		· · ·
		*******
***********		********
		******
		•••••
		·
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	***************************************	

### SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

### **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

Open to-Public Inspection

Name of the organization Citychurch Outreach Ministry 90-0063224 Part I 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 1 Total number at end of year . . . . 2 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? . . . . . . . . ☐ Yes ☐ No 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 ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 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 a certified historic structure ☐ Protection of natural habitat 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 Number of conservation easements on a certified historic structure included in (a) . . 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 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 ☐ Yes ☐ 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) ☐ Yes ☐ No 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. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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: 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: Revenues included in Form 990, Part VIII, line 1 . . . . . . . . . . . . . . . . Assets included in Form 990, Part X .

P	an	•	2

Part	III Organizations Maintaining								
3	Using the organization's acquisition, collection items (check all that apply):		her recor	ds, ch	neck any of th	e follov	wing that are a s	ignificant u	se of its
а	☐ Public exhibition		d l		oan or excha				
b	Scholarly research		e		Other				
C	Preservation for future generation								
4	Provide a description of the organization	tion's collections	and expla	in hov	w they further	the org	ganization's exen	npt purpos	e in Part
_	XIV.			_					
5	During the year, did the organization assets to be sold to raise funds rather								<b></b>
Dovi									No No
Part	line 9, or reported an amount					answe	red tes lord	mi 990, P	art IV,
19	Is the organization an agent, trustee,					ions o	other assets no	nt .	
	included on Form 990, Part X?							☐ Yes	□ No.
ь	If "Yes," explain the arrangement in P							U 168	
_	ii 100, Oxprair ii 0 araigement ii 1	at Air and comp.			g wolo.		A	mount	
С	Beginning balance					10	;		
d	Additions during the year					10			
е	Distributions during the year					16	)		<del></del>
f	Ending balance					11			
2a	Did the organization include an amount	nt on Form 990, P	art X, line	217				☐ Yes	☐ No
<u>b</u>	If "Yes," explain the arrangement in P								
Par	V Endowment Funds. Compl						<del>,</del>		
		(a) Current year	(b) Pno	r year	(c) Two year	s back	(d) Three years back	(e) Four ye	ars back
_	Beginning of year balance						· 		
b	Contributions	·						<del></del>	
С	Net investment earnings, gains, and losses								
d e	Grants or scholarships	<del></del>			+				
•	programs								
f	Administrative expenses			-				- <del> </del>	
g	End of year balance							+ -	<del></del>
2	Provide the estimated percentage of t	<u> </u>	ce held a	s:	ı		<del></del>	-l	<del></del>
а	Board designated or quasi-endowmer		%						
b	Permanent endowment ▶	%							
C	Term endowment ▶ %								
3a	Are there endowment funds not in the	e possession of the	ne organiz	ation	that are held	and ad	ministered for th	e	
	organization by:							Y	s No
	(i) unrelated organizations							3a(i)	
_	(ii) related organizations							3a(ii)	
	If "Yes" to 3a(ii), are the related organi		•				· · · · · ·	3b	
4 Part	Describe in Part XIV the intended uses  VI Land, Buildings, and Equip								
rai	Description of investment	(a) Cost or of			st or other basis	(0)	Accumulated	(d) Book v	ahua
	Description of investment	(investm		(0) (0	(other)		epreciation	(d) Book v	awe
1a	Land		98,071				<del></del>		QR 074
b	Buildings		574,251				(95,023)	-	98,071 479,228
c	Leasehold improvements		U. ¬,∠U1		<del></del>		(30,020)		-71 U,EEO
ď	Equipment		438,009				(327,130)		110,879
е	Other		461,063				(153,132)		307,931
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9		, colu	mn (B), line 10	)(c).)	>		996,109

organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part VII	Investments - Other Securities	. See Form 990, Part X,	line 12.	<del></del>
	Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year n	
(1) Financia	derivatives			
	held equity interests			
(3) Other				
(A)				
(B)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
(C)				
(D)				
(E)				
(F) (G)				
(H)				
(1)				
	(b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII		l Soo Form 000 Port V	line 12	
Part VIII	Investments—Program Related			lada
	(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year n	
<u>/1)</u>	<del> </del>		· · · · · · · · · · · · · · · · · · ·	
(1)				· · · · · · · · · · · · · · · · · · ·
(2)				<del></del>
(3)	<del></del>			
(5)				<u> </u>
(6)		· · · · · · · · · · · · · · · · · · ·		
(7)				<del></del>
(8)				
(9)				
(10)				
Total (Column	(b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets. See Form 990, Pa	rt X, line 15.		• • • •
	(£	a) Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)		·		
(6)				
_(7)				
(8)	· .			
(9)				
(10)	(h)	ol (D) line 45 \		
	umn (b) must equal Form 990, Part X, co		<b>.</b>	
Part X 1.	Other Liabilities. See Form 990,  (a) Description of liability	(b) Amount	<del></del>	<del></del>
	income taxes	(b) Attout	1	
		10.040	}	
(3)	Taxes Payable	10,042	1	
(4)			1	
(5)	<del></del>		1	
(6)	<del></del>		1	
(7)			1	
(8)			1	
(9)			1	
(10)			1	
<del>(11)</del>	** ***		1	
	(b) must equal Form 990, Part X, col. (B) line 25.)	10,042		
	ASC 740) Footnote. In Part XIV, provide	the text of the footnote to	the organization's financial stater	nents that reports the

	le D (Form 990) 2010		Page
Pari			· · · · · · · · · · · · · · · · · · ·
1	Total revenue (Form 990, Part VIII, column (A), line 12)		
2	Total expenses (Form 990, Part IX, column (A), line 25)		
3	Excess or (deficit) for the year. Subtract line 2 from line 1		
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments	<del></del>	
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		· .
_	Reconciliation of Revenue per Audited Financial Statements With Revenue	<del></del>	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments		
Ь	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV.)		
e	Add lines 2a through 2d	· · · · · · · · · · · · · · · · · · ·	
3	Subtract line 2e from line 1	. 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV.)		
c	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
	XIII Reconciliation of Expenses per Audited Financial Statements With Expense		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	§ 1	
	Denoted consists and use of facilities		
a	Donated services and use of facilities		
b	Prior year adjustments		
b	Prior year adjustments		
b c d	Prior year adjustments         2b           Other losses         2c           Other (Describe in Part XIV.)         2d		
b c d	Prior year adjustments         2b           Other losses         2c           Other (Describe in Part XIV.)         2d           Add lines 2a through 2d	. 2e	
b c d e	Prior year adjustments	· 2e	
b c d e 3	Prior year adjustments	<del></del>	
b c d e 3 4	Prior year adjustments	<del></del>	
b c d e 3 4 a b	Prior year adjustments	3	
b c d e 3 4 a b c	Prior year adjustments	. 4c	
b c d e 3 4 a b c 5	Prior year adjustments	. 4c	
b c d e 3 4 a b c 5	Prior year adjustments	. 4c . 5	I h and Oh.
b c d e 3 4 a b c 5	Prior year adjustments	. 4c . 5	
b c d e 3 4 a b c 5 Part Comp	Prior year adjustments	. 4c . 5	
b c d e 3 4 a b c 5 Part Comp	Prior year adjustments	. 4c . 5	
b c d e 3 4 a b c 5 Part Comp	Prior year adjustments	. 4c . 5	
b c d e 3 4 a b c 5 Part Comp	Prior year adjustments	. 4c . 5	
b c d e 3 4 a b c 5 Part Comp	Prior year adjustments	. 4c . 5	
b c d e 3 4 a b c 5 Part Comp	Prior year adjustments	. 4c . 5	
b c d e 3 4 a b c 5 Part Comp	Prior year adjustments	. 4c . 5	
b c d e 3 4 a b c 5 Parti	Prior year adjustments	. 4c . 5	
b c d e 3 4 a b c 5 Parti	Prior year adjustments	. 4c . 5	
b c d e 3 4 a b c 5 Parti	Prior year adjustments	. 4c . 5	
b c d e 3 4 a b c 5 Parti	Prior year adjustments	. 4c . 5	
b c d e 3 4 a b c 5 Parti	Prior year adjustments	. 4c . 5	
b c d e 3 4 a b c 5 Parti	Prior year adjustments	. 4c . 5	

Schedule D (For	rm 990) 2010	Page 5
Part XIV	Supplemental Information (continued)	
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	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
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	1.00.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1.000-1	
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# SCHEDULE (Form 990)

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

► Attach to Form 990.

OMB No 1545-0047 2010

Open to Public Inspection

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

Schedule I (Form 990) (2010) % N (h) Purpose of grant 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 Employer identification number Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to □ Yes 90-0063224 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and . . . . . . . . . . . (g) Description of non-cash assistance . . . . (f) Method of valuation (book, FMV, appraisa), other) . . Cat No 50055P . . . . . (e) Amount of non-cash assistance . . (d) Amount of cash grant • . Enter total number of section 501(c)(3) and government organizations. (c) IRC section If applicable the selection criteria used to award the grants or assistance? can be duplicated if additional space is needed. For Paperwork Reduction Act Notice, see the Instructions for Form 890. General Information on Grants and Assistance Enter total number of other organizations (D) EIN 1 (a) Name and address of organization Citychurch Outreach Ministry Department of the Treasury Internal Revenue Service Name of the organization Part II (1)N/A

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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. Schedule I (Form 990) (2010)
Part III Grants ar

Part III can be duplicated if additional space is needed	onal space is needer				
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
read rent for family.	C	208,6			
2Paid child's school tuition.	-	2,500			
3Bought clothing for children.	7	1,381			
4Paid utility bill for families.	ო	909			
5Bought food gift card for families.	55	1,195			
6Paid hotel bill for displaced families.	ဇ	609			
7 Rought shoes for children	æ	809			
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	plete this part to pro	ovide the information	n required in Part I,	line 2, and any other ad	ditional information.
					Schedule ! (Form 990) (2010)

Schedule I (Form 990) (2010)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

Part III can de duplicated if additional space is needed	al space is needed	ri			
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Bought hot water heater for family.	<b>+</b>	200			
2Bought tires for family.	-	160			
3Bought fuel for family.	-	70			
4Paid car rental for family.	-	95			
5Paid fee for individual.	-	200			
6Paid funeral cost for family.	1	250			
	,				7. 11. 11. 11. 11. 11. 11. 11. 11. 11. 1
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	ete this part to pro	wide the information	required in Part I,	line 2, and any other add	litional information.
	P	6 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -			
	4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5				
	1	0 P P P P P P P P P P P P P P P P P P P			
					Schedule I (Form 990) (2010)

### Open To Public Inspection 2010 OMB No. 1545-0047

### Transactions With Interested Persons

"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990, Part IV, line 35a, 25b, 26, 40b.
► Attach to Form 990 or Form 990-EZ, ₱ 5ee separate instructions.
► Attach to Form 990 or Form 990-EZ.

(Z3-066 no 066 mno-i) **2CHEDNIE I** 

Department of the Treasury Internal Revenue Service

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Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. 90-0063224 Citychurch Outreach Ministry Employer identification number noitexinsgno ont to emsM

Grants or Assistance Benefiting Interested Persons. III heq 20'000 **IstoT** (10) (6) (8) Ø (9) <u>(c)</u> (<del>t</del>) (E) **(Z)** 000'09 Kelly Wood, director, officer (i) 000'09 ON eeY ON SOY ON SOY ПОЛЭ agreement? principal amount

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

### 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.

20**10** Open to Public Inspection

**Employer identification number** 

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ➤ Attach to Form 990 or 990-F7.

Citychurch Outreach Ministry 90-0063224 Part VI Line 2: Two key employees who are related to each other through family are mother and son Diana Lane and Donnie Lane, Jr. They are also directors listed on Part VII. The two directors Greg and Dawnette Lusk are husband and wife Part VI Line19: The organization has governing documents, conflict of interest policy, and financial statements in its office, and they are available for public view upon request. Part III 4d: (Code ) (Expense \$189,631) (Revenue \$284,110) Citychurch has a weekly children's ministry called Kid's Night. During the fall, Winter and Spring semesters while the kids are in school we will be picking them up. "Kid's Night" will begin with a quick meal and then the kids are separated into classes. We will teach them using crafts, games and music. Durning the summer months, children are brought to our park on a weekly basis for bible lesson, games, lunch, snacks, and crafts. Each week of the summer different neighborhoods are targeted for the week long Bible club. Citychurch also fills the visable needs of the children that we minster to, including back to school needs. Citychurch also hands out Christmas boxes to children involved in our ministry. The boxes include a blanket, toys, hygiene items, socks, underware, and candy. (Code ) (Expense \$177,468) (Revenue \$282,131) Citychurch has a youth program to reach junior high and high school aged children in the disadvantaged neighborhoods of Amarillo. Youth are picked up from the middle schools and high schools once a week and brought to the church for a cafe style meal, music, games and Bible study. Each year Citychurch takes the students on a summer retreat to get them away from the pressures of the inner-city. (Code ) (Expense \$173,358) (Revenue \$282,310) The goal of the television and internet ministry is to inspire others to reach out to the hungry and lost children of their own city. The documentary style programing offered on the television program and streaming on the internet shows how to help others in need. The message of the show is an outreach to people who cannot attend Citychurch because of geographic location or disability.

Schedule O (Form 990 or 990-EZ) (2: Name of the organization	010)				Page 2
Citychurch Outreach Ministry					90-0063224
Part IX Line #24 Other Expen	ses:				
	(A)Total	(B)Program	(C)Mgmt	(D)Fund	
Contract Labor	\$ 48,888	40,788	8,100		
Repair and Maintenance	47,758	47,758			***************************************
Telephone	31,259	24,768	6,491		
Utilities	53,454	53,454			
Auto-Rep, Ins., Reg	13,542	13,542			***************************************
Equipment Rental	20,767		20,767		
Postage and Delivery	12,955		3,239	9,716	
Printing and Reproduction	1,149			1,149	
Television,Internet Outreach	122,785	112,553		10,232	
Bank Service Charges	3,161		3,161		
Supplies: Food	109,527	109,527			
Teaching Supplies	28,604	28,604			
Music Supplies	15,189	15,189			
Other Ministry Supplies	19,131	19,131			
Ministry Supplies: Fuel	22,456	22,456			
Volunteer Support	2,047	2,047			
Christmas Boxes	6,365	6,365			
Activities	22,574	22,574			
Equipment-minor	518	518		*********	
Security	682		682		
Mission Support	32,537	32,537			
Public Relations	3,804		3,804		
Miscellaneous	667		667		

TOTAL \$ 619,819 551,811 46,911 21,097