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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011

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

C Name of organization
FRIENDS OF THE BRIDEGROOM

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
3535 EAST RED BRIDGE ROAD

City or town, state or country, and ZIP + 4
KANSAS CITY, MO 64137

D Employer identification number
74-2938033

E Telephone number
(813) 763-0200

G Gross receipts $ 26,351,178

F Name and address of principal officer
SIANG CHET LIM
3535 EAST RED BRIDGE ROAD
KANSAS CITY, MO 64137

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

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

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

J Website: ▶ WWW FOTB COM

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

L Year of formation 1999

M State of legal domicile MO

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO HELP CHRISTIANS INCREASE THEIR LOVE AND DEVOTION TO GOD

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	7
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	1
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	**5**	404
6	Total number of volunteers (estimate if necessary)	**6**	150
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	27,201
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	17,720

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	15,702,735	14,799,008
9	Program service revenue (Part VIII, line 2g)	4,550,782	6,203,963
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-9,340	6,689
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,497,898	1,677,633
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	23,742,075	22,687,293
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,239,727	1,062,320
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	8,294,313	8,759,812
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶309,392		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	9,346,816	9,657,008
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	18,880,856	19,479,140
19	Revenue less expenses Subtract line 18 from line 12	4,861,219	3,208,153

		Beginning of Current Year	End of Year
Net Assets or Fund Balances			
20	Total assets (Part X, line 16)	25,750,332	27,477,350
21	Total liabilities (Part X, line 26)	9,733,990	8,291,111
22	Net assets or fund balances Subtract line 21 from line 20	16,016,342	19,186,239

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

****** | 2012-05-15
Signature of officer | Date

MARK SCHUMACHER CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed ▶ ☐	PTIN
JOHN A PARRISH	JOHN A PARRISH			
Firm's name ▶ KELLER & OWENS LLC				Firm's EIN ▶
Firm's address ▶ 10955 LOWELL AVE STE 800 OVERLAND PARK, KS 66210				Phone no ▶ (913) 338-3500

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

Part III **Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission

THE MISSION OF THE ORGANIZATION IS TO WHOLEHEARTEDLY LOVE JESUS CHRIST AND OTHERS THROUGH ESTABLISHING PERPETUAL WORSHIP AND INTERCESSION, SERVING THE POOR, INFIRMED, AND ORPHANS, PLANTING CHURCHES AND HOUSES OF PRAYER, PROCLAIMING JESUS CHRIST TO THE NATIONS, CALLING FORTH, TRAINING, AND MOBILIZING THIS GENERATION AS WORSHIPPING, INTERCEDING, PROPHETIC MESSENGERS AND JOINING WITH OTHERS TO ACCOMPLISH ITS MISSION

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

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

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

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses $ 15,414,040 including grants of $ 1,062,320) (Revenue $ 11,206,981)

CONDUCT WORKSHOPS AND SEMINARS TEACHING ABOUT THE CHRISTIAN FAITH CREATION AND DISTRIBUTION OF CHRISTIAN EDUCATIONAL MATERIALS

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

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

4d Other program services (Describe in Schedule O)

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

4e **Total program service expenses** ▶ $ 15,414,040

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2	Yes	
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		No
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		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
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		No
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		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
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		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*	11c		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a		No
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
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	Yes	
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 U S ? *If "Yes," complete Schedule F, Parts II and IV*	15	Yes	
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 U S ? *If "Yes," complete Schedule F, Parts III and IV*	16	Yes	
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		No
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		No
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		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

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**	Yes	
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**	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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**		No
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–24d and complete Schedule K. If "No," go to line 25*	**24a**		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		No
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**		No
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**		No
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**		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**	Yes	
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**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
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**		No
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**	Yes	
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**	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	**35**	Yes	
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* ☑ **Yes** ☐ **No**			
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	**36**		No
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**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	288		
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	2a	404		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Yes
	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	Yes
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b	Yes
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	No
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .			5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c	
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h	
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8	
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?			9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a	No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .			14b	

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	7		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . .		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		5		No
6	Does the organization have members or stockholders?		6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . .		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		No

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶

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

☐ Own website ☐ Another's website ☑ Upon request

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

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

THE ORGANIZATION
3451 E RED BRIDGE ROAD
KANSAS CITY, MO 64137
(816) 763-0200

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MICHAEL BICKLE PRESIDENT	45 00	X		X				80,191	0	9,192
(2) ALLEN HOOD ASSOCIATE DIRECTOR	40 00	X						3,415	70,279	31,852
(3) MARCI SORGE SECRETARY	35 00	X		X				0	0	0
(4) JACK HILL TRUSTEE	15 00	X						0	32,100	0
(5) SIANG CHET LIM CEO	40 00	X		X				0	37,904	28,989
(6) MISTY EDWARDS TRUSTEE	10 00	X						0	45,162	0
(7) SCOTT EIBEL TRUSTEE	2 00	X						0	3,000	0
(8) MARK A SCHUMACHER TREASURER/CFO	30 00			X				36,358	0	0

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
1b **Sub-Total** . . . . . ▶										
c **Total from continuation sheets to Part VII, Section A** . . . . ▶										
d **Total (add lines 1b and 1c)** . . . . . ▶								119,964	188,445	70,033

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 0

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
MCCOWN GORDON CONSTRUCTION LLC 422 ADMIRAL BLVD KANSAS CITY, MO 64106	CONSTRUCTION	3,219,015
HEARTLAND PROPERTY SOLUTIONS LLC 10743 CYPRESS AVE KANSAS CITY, MO 64137	CONSTRUCTION	559,444
TITAN BUILT 11865 S CONLEY OLATHE, KS 66061	CONSTRUCTION	408,524
BNB DESIGN LLC 108 N NETTLETON AVE BONNER SPRINGS, KS 66012	CONSTRUCTION	199,396
HARRIS ROOFING 8100 E 40 HWY KANSAS CITY, MO 64129	CONSTRUCTION	173,200

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 7

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns . . 1a					
	b Membership dues 1b					
	c Fundraising events 1c					
	d Related organizations . . . 1d					
	e Government grants (contributions) 1e					
	f All other contributions, gifts, grants, and similar amounts not included above 1f	14,799,008				
	g Noncash contributions included in lines 1a-1f $	239,770				
	h **Total.** Add lines 1a-1f . . . . . ▶		14,799,008			
Program Service Revenue		Business Code				
	2a REGISTRATION/APPLICATI	900099	6,199,785	6,199,785		
	b LATE FEES CHARGED	900099	3,389	3,389		
	c VENDING INCOME FOR CON	900099	789	789		
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a–2f . . . . . ▶		6,203,963			
	3 Investment income (including dividends, interest and other similar amounts) . . . . . ▶		2,780			2,780
	4 Income from investment of tax-exempt bond proceeds . . ▶					
	5 Royalties . . . . . ▶		98,743			98,743
		(i) Real / (ii) Personal				
	6a Gross Rents	913,031				
	b Less rental expenses	1,044,684				
	c Rental income or (loss)	-131,653				
	d Net rental income or (loss) . . . . . ▶		-131,653	-212,022	18,720	61,649
		(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory	3,909				
	b Less cost or other basis and sales expenses					
	c Gain or (loss)	3,909				
	d Net gain or (loss) . . . . . ▶		3,909			3,909
Other Revenue	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18 . . . a					
	b Less direct expenses . . . b					
	c Net income or (loss) from fundraising events . . ▶					
	9a Gross income from gaming activities See Part IV, line 19 . a					
	b Less direct expenses . . . . . b					
	c Net income or (loss) from gaming activities . . ▶					
	10a Gross sales of inventory, less returns and allowances . a	4,211,369				
	b Less cost of goods sold . . b	2,619,201				
	c Net income or (loss) from sales of inventory . . ▶		1,592,168	1,592,168		
	Miscellaneous Revenue	Business Code				
	11a INCOME FROM GLAD HEART	900099	87,798			87,798
	b MISCELLANEOUS REVENUE	900099	22,096	22,096		
	c BOOKKEEPING/OTHER SERV	541200	8,481		8,481	
	d All other revenue					
	e **Total.** Add lines 11a–11d . . . . . ▶		118,375			
	12 **Total revenue.** See Instructions . . . ▶		22,687,293	7,606,205	27,201	254,879

Part IX Statement of Functional Expenses

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2 Grants and other assistance to individuals in the U S See Part IV, line 22	543,590	543,590		
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	518,730	518,730		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	125,723	99,830	19,607	6,286
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	8,444,539	6,432,193	1,860,857	151,489
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	189,550	89,798	96,418	3,334
a Fees for services (non-employees) Management				
b Legal	132,354		132,354	
c Accounting	157,679		157,679	
d Lobbying				
e Professional fundraising services *See Part IV, line 17*				
f Investment management fees				
g Other	282,428	195,881	64,887	21,660
12 Advertising and promotion	137,465	129,139	7,301	1,025
13 Office expenses	1,626,162	1,239,365	312,725	74,072
14 Information technology	538,255	333,525	202,159	2,571
15 Royalties				
16 Occupancy	1,791,820	1,495,203	296,436	181
17 Travel	588,230	571,815	16,415	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,976,699	1,879,667	48,258	48,774
20 Interest	280,600	238,639	41,961	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,467,982	1,081,191	386,791	
23 Insurance	333,325	222,273	111,052	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a STREAMING	293,046	293,046		
b BAD DEBT EXPENSE	32,140	32,140		
c LICENSES AND PERMITS	14,720	14,037	683	
d DUES & SUBSCRIPTIONS	4,103	3,978	125	
e				
f All other expenses				
25 **Total functional expenses.** Add lines 1 through 24f	19,479,140	15,414,040	3,755,708	309,392
26 **Joint costs.** Check here ▶ ☑ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		378,723	1	165,880
	2	Savings and temporary cash investments		4,786,753	2	1,139,812
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		371,673	4	117,264
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		1,252,644	8	848,548
	9	Prepaid expenses and deferred charges		134,874	9	144,857
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 31,669,094			
	b	Less accumulated depreciation	10b 7,573,843	18,121,518	10c	24,095,251
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11		91,948	12	270,282
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		612,199	15	695,456
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		25,750,332	16	27,477,350
Liabilities	17	Accounts payable and accrued expenses		2,524,708	17	1,293,889
	18	Grants payable			18	
	19	Deferred revenue		988,648	19	854,863
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*			22	
	23	Secured mortgages and notes payable to unrelated third parties		6,196,696	23	6,137,492
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D		23,938	25	4,867
	26	**Total liabilities.** Add lines 17 through 25		9,733,990	26	8,291,111
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		11,424,043	27	18,574,554
	28	Temporarily restricted net assets		4,592,299	28	611,685
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		16,016,342	33	19,186,239
	34	Total liabilities and net assets/fund balances		25,750,332	34	27,477,350

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12) . . .	1	22,687,293
2	Total expenses (must equal Part IX, column (A), line 25)	2	19,479,140
3	Revenue less expenses Subtract line 2 from line 1	3	3,208,153
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	16,016,342
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-38,256
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	19,186,239

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
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 separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .	3b		

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
FRIENDS OF THE BRIDEGROOM

Employer identification number
74-2938033

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

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

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

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

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

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

_____

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to 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						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
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 activities, etc (See instructions) **12**

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

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f)) **14**

15 Public Support Percentage for 2009 Schedule A, Part II, line 14 **15**

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

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

17a **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

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

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

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	6,795,616	9,491,202	12,554,210	15,702,735	14,799,008	59,342,771
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	8,405,447	8,785,393	8,948,280	11,255,295	11,206,981	48,601,396
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	15,201,063	18,276,595	21,502,490	26,958,030	26,005,989	107,944,167
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	2,363,670	3,236,533	4,074,130	3,947,330	4,319,735	17,941,398
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	2,363,670	3,236,533	4,074,130	3,947,330	4,319,735	17,941,398
8 **Public Support** (Subtract line 7c from line 6)						90,002,769

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	15,201,063	18,276,595	21,502,490	26,958,030	26,005,989	107,944,167
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	164,016	300,020	55,212	234,321	198,801	952,370
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	164,016	300,020	55,212	234,321	198,801	952,370
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		5,162	1,222	3,211	18,720	28,315
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)		42,989	324,823	110,001	87,798	565,611
13 **Total support** (Add lines 9, 10c, 11 and 12)	15,365,079	18,624,766	21,883,747	27,305,563	26,311,308	109,490,463

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	82 200 %
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	83 590 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f))	17	0 870 %
18	Investment income percentage from **2009** Schedule A, Part III, line 17	18	0 990 %

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

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

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

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

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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

2010

Open to Public Inspection

Name of the organization
FRIENDS OF THE BRIDEGROOM

Employer identification number
74-2938033

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)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 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

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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 ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–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 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)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 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.

1a If the organization elected, as permitted under SFAS 116, 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, 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

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 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 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ▶
- b Permanent endowment ▶
- c Term endowment ▶

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		4,988,639		4,988,639
b Buildings		18,919,571	2,938,821	15,980,750
c Leasehold improvements				
d Equipment		6,871,957	4,635,022	2,236,935
e Other		888,927		888,927
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				24,095,251

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
TENANT SECURITY DEPOSITS	4,867
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	4,867

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 (ASC740)

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	22,687,293
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	19,479,140
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	3,208,153
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	-38,256
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-38,256
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	3,169,897

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	29,819,609
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	3,835,931		
e	Add lines **2a** through **2d**			2e	3,835,931
3	Subtract line **2e** from line **1**			3	25,983,678
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	-3,296,385		
c	Add lines **4a** and **4b**			4c	-3,296,385
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	22,687,293

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	26,611,456
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	7,499,815		
e	Add lines **2a** through **2d**			2e	7,499,815
3	Subtract line **2e** from line **1**			3	19,111,641
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	367,499		
c	Add lines **4a** and **4b**			4c	367,499
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	19,479,140

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ORGANIZATION HAS ADOPTED THE PROVISIONS OF THE FASB ASC 740-10 AS IT MIGHT APPLY TO THE ORGANIZATION'S FINANCIAL TRANSACTIONS THE ORGANIZATION'S POLICY IS TO RECORD A LIABILITY FOR ANY TAX POSITION THAT IS BENEFICIAL TO THE ORGANIZATION, INCLUDING ANY RELATED INTEREST AND PENALTIES, WHEN IT IS MORE LIKELY THAN NOT THE POSITION TAKEN BY MANAGEMENT WITH RESPECT TO THE TRANSACTION OR CLASS OF TRANSACTIONS WILL BE OVERTURNED BY A TAXING AUTHORITY UPON EXAMINATION MANAGEMENT BELIEVES THERE ARE NO SUCH POSITIONS AS OF JUNE 30, 2011 AND, ACCORDINGLY, NO LIABILITY HAS BEEN ACCRUED
PART XII, LINE 2D - OTHER ADJUSTMENTS		INTERDEPARTMENTAL REVENUE 3,835,931
PART XII, LINE 4B - OTHER ADJUSTMENTS		RENTAL EXPENSES -1,044,683 COST OF GOODS SOLD - 2,619,201 REVENUE FROM WHOLLY OWNED DISREGARDED ENTITIES 132,282 NET INCOME FROM WHOLLY OWNED DISREGARDED ENTITIES -12,393 SCHOLARSHIPS 247,610
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSE 1,044,683 COST OF GOODS SOLD 2,619,201 INTERDEPARTMENTAL EXPENSES 3,835,931
PART XIII, LINE 4B - OTHER ADJUSTMENTS		EXPENSES FROM WHOLLY OWNED DISREGARDED ENTITIES 119,889 SCHOLARSHIPS 247,610

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SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
FRIENDS OF THE BRIDEGROOM

Employer identification number
74-2938033

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☐ Yes ☑ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Part V if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
EAST ASIA AND THE PACIFIC	0	13	PROGRAM SERVICE	CHRISTIAN CONFERENCE, MISSION TRIP, CHRISTIAN MISSION WORK	41,484
EUROPE (INCLUDING ICELAND & GREENLAND)	0	18	PROGRAM SERVICE	CHRISTIAN MISSION WORK	46,422
SUB-SAHARAN AFRICA	0	2	PROGRAM SERVICE	ACTS OUTREACH LOCATION PLANNING	8,576
SOUTH AMERICA	0	1	MISSIONS	MISSION TRIP	3,000
MIDDLE EAST AND NORTH AFRICA	0	4	PROGRAM SERVICES	CONFERENCE EVENT	7,931
RUSSIA & THE NEWLY INDEPENDENT STATES	0	1	MISSIONS	MISSION TRIP	240
3a Sub-total	0	39			107,653
b Total from continuation sheets to Part I	0	0			0
c **Totals** (add lines 3a and 3b)	0	39			107,653

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . . ▶ ☐
Use Part V if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	CHRISTIAN MISSIONS	25,000	ELECTRONIC WIRE TRANSFER/CHECK			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ 1

3 Enter total number of other organizations or entities . . . . . ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
CHRISTIAN MISSION WORK	SUB-SAHARAN AFRICA	1	5,000	CHECK			

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*	☑ Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*	☐ Yes	☑ No

Part V **Supplemental Information**

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 A ALL APPROVED FUNDING OF FOREIGN MISSIONS ARE MONITORED BY THE BOARD THROUGH SPECIFIC REPORTING FROM THE RESPONSIBLE PERSON FOR EACH RECIPIENT RELIGIOUS ORGANIZATION, CHARITY OR OVERSEER OF THE FOREIGN PROJECT REPORTS MUST BE SUBMITTED BY EACH RECIPIENT RELIGIOUS ORGANIZATION, CHARITY OR OVERSEER OF THE FOREIGN PROJECT AT LEAST EVERY CALENDAR QUARTER B THE REPORTS SUBMITTED BY RELIGIOUS ORGANIZATIONS, CHARITIES OR OVERSEERS OF THE FOREIGN PROJECTS MUST INCLUDE FINANCIAL STATEMENTS (CURRENT WITHIN 30 DAYS) REFLECTING ACTUAL FOREIGN MISSION EXPENSES COMPARED WITH THE PROJECTED FOREIGN MISSION BUDGET PREVIOUSLY SUBMITTED THE REPORTS SHALL CONTAIN A BRIEF EVALUATION OF THE FOREIGN MISSION MILESTONES AND ALL SIGNIFICANT POST-FUNDING DEVELOPMENTS AND CONTAIN SUFFICIENT SUPPORTING DOCUMENTARY EVIDENCE (PHOTOGRAPHIC, VIDEOGRAPHIC AND/OR TESTIMONIAL) TO ENABLE THE FOTB'S CHIEF EXECUTIVE OFFICER TO VERIFY THE EVALUATION AFTER EVALUATING EACH REPORT, THE CHIEF EXECUTIVE OFFICER REFERS THEM TO THE EXECUTIVE COMMITTEE WITH A RECOMMENDATION FOR CONTINUING OR DISCONTINUING FUNDING C ALL FOREIGN MISSIONS REQUESTS ARE FUNDED WITH THE UNDERSTANDING THAT FOTB RETAINS FULL CONTROL OF ALL SUCH FUNDS, EXERCISES ABSOLUTE DISCRETION AS TO THEIR USE, AND RETAINS THE RIGHT TO DISCONTINUE FUNDING AND TO RECEIVE THE REFUND OF FUNDS ALREADY GRANTED BUT NOT EXPENDED AT ANY TIME IT DETERMINES THAT THE PROJECT GOALS OR STANDARDS OF PERFORMANCE ARE NOT BEING MET, THE BUDGET IS NOT BEING ADHERED TO, ACCOUNTABILITY STANDARDS ARE NOT BEING SATISFIED, OR, IN FOTB'S SOLE DISCRETION, FOR ANY OTHER REASON D RECOGNIZING THAT FOTB HAS PREVIOUSLY ESTABLISHED LONG STANDING RELATIONSHIPS WITH SOME FOREIGN RELIGIOUS OR CHARITABLE ORGANIZATIONS, AND WITH DOMESTIC RELIGIOUS AND CHARITABLE ORGANIZATIONS INVOLVED IN FOREIGN MISSIONS, AND IS SUFFICIENTLY FAMILIAR WITH THE RELIGIOUS OR CHARITABLE PURPOSES, WORKS AND KEY PERSONNEL OF SUCH ORGANIZATIONS TO HAVE A REASONABLY BASED CONFIDENCE THAT SUCH ORGANIZATIONS HAVE IN THE PAST, AND WILL IN THE FUTURE, USE THE FUNDS OF IHOP-KC FOR RELIGIOUS AND CHARITABLE PURPOSES, AND RECOGNIZING THAT IN SOME INSTANCES IT MAY NOT BE ECONOMICALLY PRACTICABLE FOR A RELIGIOUS OR CHARITABLE ORGANIZATION TO COMPLY WITH ALL OF THE REQUIREMENTS CONTAINED HEREIN, THE BOARD MAY, FROM TIME TO TIME, WAIVE SOME OF THE ABOVE REQUIREMENTS IN SUCH INSTANCES, THE BOARD SHALL MAKE THOSE REQUIREMENTS OF THE RELIGIOUS OR CHARITABLE ORGANIZATIONS THAT ARE ECONOMICALLY PRACTICABLE AND WILL ENABLE THE BOARD TO HAVE A CONTINUING CONFIDENCE THAT THE FUNDS OF FOTB ARE USED FOR THE INTENDED RELIGIOUS AND CHARITABLE PURPOSES

Identifier	Return Reference	Explanation
OTHER INFORMATION	SCHEDULE F, PART V	SCHEDULE F, PART IV, LINE 1 THE TRANSFERS REFERENCED IN THIS LINE RELATE TO THE GRANTS TO CHARITABLE ORGANIZATIONS NOTED IN PART II OF SCHEDULE F FORM 926 IS NOT REQUIRED FOR THIS TYPE OF TRANSACTION

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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, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
FRIENDS OF THE BRIDEGROOM

Employer identification number
74-2938033

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" 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. . . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(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
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations . . . . . ▶ 24

3 Enter total number of other organizations . . . . . ▶ 0

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. Use Schedule I-1 (Form 990) if additional space is needed.

(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) BENEVOLENCE	7106	203,780			
(2) MISSIONS	10	92,200			
(3) SCHOLARSHIPS	125		247,610		TUITION REDUCTION SCHOLARSHIPS ARE GIVEN BASED ON SET CRITERIA

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 A IN REGARD TO GRANTS TO ORGANIZATIONS, ALL OF THE ORGANIZATIONS TO WHOM GRANTS HAVE BEEN MADE ARE 501(C)(3) CHARITABLE AND/OR RELIGIOUS ORGANIZATIONS HAVE PREVIOUSLY ESTABLISHED LONG STANDING RELATIONSHIPS WITH FOTB FOTB IS SUFFICIENTLY FAMILIAR WITH THE RELIGIOUS OR CHARITABLE PURPOSES, WORKS AND KEY PERSONNEL OF SUCH ORGANIZATIONS, AND THROUGH PERSONAL COMMUNICATIONS WITH THE KEY PERSONNEL OF THESE ORGANIZATIONS, FOTB HAS A REASONABLY BASED CONFIDENCE THAT SUCH ORGANIZATIONS HAVE IN THE PAST, AND WILL IN THE FUTURE, USE THE FUNDS OF FOTB FOR THE INTENDED RELIGIOUS AND CHARITABLE PURPOSES B IN REGARD TO BENEVOLENCE GRANTS TO INDIVIDUALS, FOTB HAS A COMMUNITY CARE DEPARTMENT THAT ASSESSES THE NEEDS OF THE INDIVIDUALS, MAKES RECOMMENDATIONS AS TO THE AMOUNT OF GRANTS AND ENGAGES IN FOLLOW UP WITH THE INDIVIDUALS TO ASSIST THEM IN ADDRESSING ANY ONGOING FINANCIAL ISSUES

Additional Data Return to Form

Software ID:
Software Version:
EIN: 74-2938033
Name: FRIENDS OF THE BRIDEGROOM

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(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
INTERNATIONAL HOUSE OF PRAYER3535 E RED BRIDGE ROAD KANSAS CITY,MO 64137	74-2938029	501(C)(3)	5,000				CHRISTIAN EDUCATION AND TRAINING, PRAYER ROOM OPERATION, SERVING THE POOR
THE CALL3535 E RED BRIDGE ROAD KANSAS CITY,MO 64137	95-4754631	501(C)(3)	43,000				CHRISTIAN MISSIONS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(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
LIGHT TO THE NATIONSPO BOX 406 NEW CUMBERLAND, PA 17070	71-0580296	501(C)(3)	11,500				CHRISTIAN MISSIONS
TIKKUN INTERNATIONAL PO BOX 2997 GAITHERSBURG, MD 20886	52-1860036	501(C)(3)	47,000				CHRISTIAN MISSIONS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(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
DEEPER WATERS11520 GRANDVIEW ROAD KANSAS CITY,MO 64137	43-1719504	501(C)(3)	12,000				CHRISTIAN MISSIONS
EAGLES WINGSPO BOX 450 CLARENCE,NY 14031	16-1462696	501(C)(3)	15,000				CHRISTIAN MISSIONS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(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
INTERNATIONAL RECONCILIATION COALITIONPO BOX 3278 VENTURA,CA 93006	68-0031285	501(C)(3)	15,000				CHRISTIAN MISSIONS
ROAD TO JERUSALEM700 N COLORADO AVE 152 DENVER,CO 80206	20-0918930	501(C)(3)	12,000				CHRISTIAN MISSIONS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(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
UNIVERSITY OF THE NATIONS75-5851 KUAKINI HWY KAILUA KONA,HI 96740	99-0240539	501(C)(3)	35,000				CHRISTIAN MISSIONS
YWAM CAMPAIGNSPO BOX 38 GRANDVIEW,MO 64030	41-1719055	501(C)(3)	15,000				CHRISTIAN MISSIONS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(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
FINAL FRONTIER MINISTRIESPO BOX 121971 NASHVILLE,TN 37212	43-1711771	501(C)(3)	15,000				CHRISTIAN MISSIONS
ORPHAN JUSTICE CENTER PO BOX 877 GRANDVIEW,MO 64030	27-2344714	501(C)(3)	25,000				ADOPTION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(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
HELPING HANDS MINISTRIES INCPO BOX 337 TALLULAH FALLS, GA 30573	58-2266139	501(C)(3)	28,000				MEDICAL ASSISTANCE
EXODUS CRY INC3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137	26-2317116	501(C)(3)	26,200				CHRISTIAN MISSIONS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(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
FRONTIERSPO BOX 60730 PHOENIX,AZ 85082	99-9999999	501(C)(3)	7,500				CHRISTIAN MISSIONS
CITYWIDE PRAYER MOVEMENTPO BOX 5277 KANSAS CITY,MO 64112	43-1763785	501(C)(3)	8,400				CHRISTIAN MISSIONS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(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
JUSTICE HOUSE OF PRAYER INC1317 E MISSOURI AVE EL PASO,TX 79902	27-4655181	501(C)(3)	8,600				CHRISTIAN MISSIONS
FISHERS OF MEN MINISTRIES INTERNATIONALPO BOX 410953 MELBOURNE,FL 32941	59-2743310	501(C)(3)	5,000				CHRISTIAN MISSIONS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(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
GRANDVIEW POLICE DEPARTMENT1200 MAIN STREET GRANDVIEW,MO 64030	44-6005558	GOVERNMENT	10,000				SUPPORT
GRANDVIEW ASSISTANCE PROGRAM1121 MAIN STREET GRANDVIEW,MO 64030	43-1607813	GOVERNMENT	5,000				SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(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
MIDWEST MINISTRIES FELLOWSHIP23300 PINK HILL RD BLUE SPRINGS,MO 64015	43-1701258	501(C)(3)	8,000				CHRISTIAN MISSIONS
GRANDVIEW FIRE DEPARTMENT7005 HIGHGROVE RD GRANDVIEW,MO 64030	44-6005558	GOVERNMENT	5,000				SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(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
LIGHT TO THE NATIONS - PENNSYLVANIAPO BOX 406 NEW CUMBERLAND, PA 17070	71-0580296	501(C)(3)	27,000				CHRISTIAN MISSIONS
CENTRAL FREEWILL BAPTIST CHURCH3200 BLUE RIDGE EXT GRANDVIEW, MO 64030	43-1297793	501(C)(3)	5,000				CHRISTIAN MISSIONS

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Schedule L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
FRIENDS OF THE BRIDEGROOM

Employer identification number
74-2938033

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

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

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

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

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

Part II Loans to and/or From Interested Persons.

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

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

Part III Grants or Assistance Benefitting Interested Persons.

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

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

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) CLAY EDWARDS	BROTHER OF MISTY EDWARDS, DIRECTOR	18,964	COMPENSATION PAID		No
(2) DIANE BICKLE	SPOUSE OF MICHAEL BICKLE, PRESIDENT	20,475	DIANE BICKLE RECEIVED $20,475 IN RENT FOR STUDENT/INTERN HOUSING PROVIDED		No
(3) DIANE BICKLE	SPOUSE OF MICHAEL BICKLE, PRESIDENT	30,000	COMPENSATION PAID BY GLAD HEART, WHOLLY OWNED SUBSIDIARY		No
(4) HEARTLAND PROPERTY SOLUTIONS LLC	OWNED BY BOARD MEMBER OF EXODUS CRY (CONTROLLED BY THE ORGANIZATION)	559,444	FEES PAID FOR CONSTRUCTION SERVICES (SEE PART VII, SECTION B OF FORM 990)		No

Part V Supplemental Information

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

Identifier	Return Reference	Explanation

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
FRIENDS OF THE BRIDEGROOM

Employer identification number
74-2938033

Part I 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 oncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		50,000	COST
5 Clothing and household goods				
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	X	1	93,300	FAIR MARKET VALUE
18 Collectibles	X	2	96,470	FAIR MARKET VALUE
19 Food inventory				
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 during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . **29**

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 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?	**30a**		No
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?	**31**	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	**32a**		No
b If "Yes," describe in Part II			
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II			

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTORS	PART I, COLUMN (B)	THE NUMBER OF CONTRIBUTORS REFLECTS THE ACTUAL NUMBER OF DONORS OF EACH TYPE OF NONCASH CONTRIBUTION

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
FRIENDS OF THE BRIDEGROOM

Employer identification number
74-2938033

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4		THE ORGANIZATION AMENDED ITS BYLAWS BEGINNING IN FEBRUARY 2012, THE ORGANIZATION'S BOARD MEMBERS WILL BE APPOINTED BY INTERNATIONAL HOUSE OF PRAYER-FORERUNNER CHRISTIAN FELLOWSHIP

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		AN OFFICER OF THE ORGANIZATION REVIEWS THE RETURN EACH BOARD MEMBER RECEIVES A COPY OF THE RETURN TO REVIEW AND HAS OPPORTUNITY TO MAKE COMMENTS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION REQUIRES THAT ITS DIRECTORS AND OFFICERS ANNUALLY DISCLOSE ANY CONFLICTS OF INTEREST DIRECTORS ARE REQUIRED TO RECUSE THEMSELVES FROM ANY DISCUSSION AND DECISION MAKING RELATED TO CONFLICTS OF INTEREST

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE COMPLIANCE OFFICER GATHERS COMPARABLE COMPENSATION DATA FOR SIMILARLY QUALIFIED INDIVIDUALS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS THIS DATA IS PRESENTED TO THE COMPENSATION COMMITTEE THE COMPENSATION COMMITTEE THEN REVIEWS THE DATA AND MAKES SALARY RECOMMENDATIONS TO THE BOARD OF DIRECTORS THE BOARD OF DIRECTORS MAKES THE FINAL SALARY DETERMINATION OF ALL OFFICERS THE COMPENSATION COMMITTEE AND BOARD OF DIRECTORS DOCUMENT THE DECISION PROCESS IN MEETING MINUTES NO PERSON WITH A CONFLICT OF INTEREST IS ABLE TO PARTICIPATE IN ANY PART OF THE DELIBERATION OR DECISION MAKING PROCESS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	PRIOR PERIOD ADJUSTMENTS -38,256

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
FRIENDS OF THE BRIDEGROOM

Employer identification number
74-2938033

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) HANNAH'S DREAM ADOPTIONS LLC 3535 E RED BRIDGE RD KANSAS CITY, MO 64137 26-4290459	TO PROVIDE CHRISTIAN COUPLES ADOPTION SERVICES AT AN AFFORDABLE COST	MO	132,282	33,730	FRIENDS OF THE BRIDEGROOM

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) INTERNATIONAL HOUSE OF PRAYER 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 74-2938029	TEACHING AND ENCOURAGING PEOPLE TO PRAY THROUGH PRAYER MEETINGS AND SEMINARS	MO	501(C)(3)	LINE 7	N/A		No
(2) SHILOH MINISTRIES INC 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 43-1859010	TO MINISTER TO CHRISTIAN CHURCH LEADERS THROUGH CHRISTIAN RETREATS/SEMINARS	MO	501(C)(3)	LINE 9	N/A		No
(3) EXODUS CRY INC 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 26-2317116	HUMAN TRAFFICKING AWARENESS	MO	501(C)(3)	LINE 11A, I	FRIENDS OF THE BRIDEGROOM	Yes	
(4) NEFARIOUS (DISREGARDED ENTITY OF EXODUS CRY) 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 45-1655899	FILM PRODUCTION	MO	501(C)(3)	LINE 11A, I	FRIENDS OF THE BRIDEGROOM	Yes	
(5) INTERNATIONAL HOUSE OF PRAYER - FORERUNNER CHRISTIAN FELLOWSHIP 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 45-2262183	CHURCH	MO	501(C)(3)	LINE 1	N/A		No
(6) FORERUNNER INTERNATIONAL 12501 ASKEW GRANDVIEW, MO 64030 71-0918746	PROMOTING WORLD MISSIONS AND SPREADING THE GOSPEL TO EVERY NATION OF THE WOR	MO	501(C)(3)	LINE 7	N/A		No

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) GLAD HEART PROPERTIES INC 3435 E RED BRIDGE RD KANSAS CITY, MO64137 91-2051891	REAL ESTATE AGENT	MO	FRIENDS OF THE BRIDEGROOM	C	87,798	228,338	100 000 %

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

		Yes	No
Note. Complete line 1 if any entity is listed in Parts II, III or IV			
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	1a	Yes	
b Gift, grant, or capital contribution to other organization(s)	1b	Yes	
c Gift, grant, or capital contribution from other organization(s)	1c		No
d Loans or loan guarantees to or for other organization(s)	1d		No
e Loans or loan guarantees by other organization(s)	1e		No
f Sale of assets to other organization(s)	1f	Yes	
g Purchase of assets from other organization(s)	1g		No
h Exchange of assets	1h		No
i Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	Yes	
l Performance of services or membership or fundraising solicitations by other organization(s)	1l		No
m Sharing of facilities, equipment, mailing lists, or other assets	1m		No
n Sharing of paid employees	1n		No
o Reimbursement paid to other organization for expenses	1o	Yes	
p Reimbursement paid by other organization for expenses	1p		No
q Other transfer of cash or property to other organization(s)	1q	Yes	
r Other transfer of cash or property from other organization(s)	1r		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) GLAD HEART PROPERTIES	K	8,481	ACTUAL AMOUNT
(2) GLAD HEART PROPERTIES	A	46,200	ACTUAL AMOUNT
(3) EXODUS CRY INC	B	26,200	ACTUAL AMOUNT
(4) EXODUS CRY INC	K	5,996	ACTUAL AMOUNT
(5) EXODUS CRY INC	F	5,903	ACTUAL MERCHANDISE SOLD
(6) NEFARIOUS	K	109	ACTUAL AMOUNT

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 74-2938033
Name: FRIENDS OF THE BRIDEGROOM

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501 (c)(3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled organization	
						Yes	No
INTERNATIONAL HOUSE OF PRAYER 3535 E RED BRIDGE ROAD KANSAS CITY, MO64137 74-2938029	TEACHING AND ENCOURAGING PEOPLE TO PRAY THROUGH PRAYER MEETINGS AND SEMINARS	MO	501(C)(3)	LINE 7	N/A		No
SHILOH MINISTRIES INC 3535 E RED BRIDGE ROAD KANSAS CITY, MO64137 43-1859010	TO MINISTER TO CHRISTIAN CHURCH LEADERS THROUGH CHRISTIAN RETREATS/SEMINARS	MO	501(C)(3)	LINE 9	N/A		No
EXODUS CRY INC 3535 E RED BRIDGE ROAD KANSAS CITY, MO64137 26-2317116	HUMAN TRAFFICKING AWARENESS	MO	501(C)(3)	LINE 11A, I	FRIENDS OF THE BRIDEGROOM	Yes	
NEFARIOUS (DISREGARDED ENTITY OF EXODUS CRY) 3535 E RED BRIDGE ROAD KANSAS CITY, MO64137 45-1655899	FILM PRODUCTION	MO	501(C)(3)	LINE 11A, I	FRIENDS OF THE BRIDEGROOM	Yes	
INTERNATIONAL HOUSE OF PRAYER - FORERUNNER CHRISTIAN FELLOWSHIP 3535 E RED BRIDGE ROAD KANSAS CITY, MO64137 45-2262183	CHURCH	MO	501(C)(3)	LINE 1	N/A		No
FORERUNNER INTERNATIONAL 12501 ASKEW GRANDVIEW, MO64030 71-0918746	PROMOTING WORLD MISSIONS AND SPREADING THE GOSPEL TO EVERY NATION OF THE WOR	MO	501(C)(3)	LINE 7	N/A		No

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount Involved ($)	(d) Method of determining amount involved
(1)	GLAD HEART PROPERTIES	K	8,481	ACTUAL AMOUNT
(2)	GLAD HEART PROPERTIES	A	46,200	ACTUAL AMOUNT
(3)	EXODUS CRY INC	B	26,200	ACTUAL AMOUNT
(4)	EXODUS CRY INC	K	5,996	ACTUAL AMOUNT
(5)	EXODUS CRY INC	F	5,903	ACTUAL MERCHANDISE SOLD
(6)	NEFARIOUS	K	109	ACTUAL AMOUNT