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DLN: 93493128014262

Form **990**

Department of the Treasury

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)

2010

OMB No 1545-0047

Open to Public

nternal	Revenue	Service Fine organization may have to use a copy of the	iis return to satisfy	state reporting	requirements	Inspection
A Fo	r the 2		nd ending 06-30-20	11	D Employe	r identification number
_		pplicable C Name of organization Daystar US				
_	Iress ch	Doing Business As			95-373	2280
Nar	ne chai	nge			E Telephon	e number
Inıt	ıal retui	Number and street (or P O box it mail is not delivered to	street address)	Room/suite	(952) 92	28-2550
_ Ter	mınated	d 5701 Normandale Rd No 325				
– Am	ended i				G Gross rece	eipts \$ 1,069,145
– App	lication	Edina, MN 55424 pending				
		F Name and address of principal officer		H(a) Is this	a group roturn for af	filiates? Yes No
		Dennis Morrow		In(d) Is this a	group recurrior ar	illiates (No
		5701 Normandale Rd No 325 Edina, MN 55424		H(b) Are all	affiliates include	ed?
		Edita, Fix 33424		If "No	o," attach a lı	st (see instructions)
Ta	x-exem	ppt status	(a)(1) or	H(c) Grou	ip exemption	number 🟲
			(-,(-, -, -,	\dashv		
		: • www daystarus org		<u> </u>		
(Forr	n of org	ganization 🔽 Corporation 🦳 Trust 🦳 Association 🦳 Other 🕨		L Year of fo	rmation 1982	M State of legal domicile CA
Pa	rt I	Summary				
		Briefly describe the organization's mission or most signific				
υ]	To advance the education of Jesus-centered servant leade	rs to transform A fri	ca		
<u>3</u>	-					
<u> </u>	-					
ACUVILIES & GOVERIANICE	2 0	Check this box 🔭 if the organization discontinued its ope	rations or disposed	of more than 2	5% of its net	assets
5	1 E	Number of voting members of the governing body (Part VI,	line 1a)		3	19
o o			•		. 4	19
Ë		Fotal number of individuals employed in calendar year 201		•	5	
5		Fotal number of volunteers (estimate if necessary)			6	
ŧ		Fotal unrelated business revenue from Part VIII, column (78	
		Net unrelated business taxable income from Form 990-T, I	••		71	
				Prio	r Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		7110	953,102	
9	9	Program service revenue (Part VIII, line 2g)	0	<u> </u>		
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, an				
Ě	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c	•		17,500 -22,657	<u> </u>
	12	Total revenue—add lines 8 through 11 (must equal Part		ne	22,037	
	12	12)	, , , , , , , , , , , , , , , , , , , ,		947,945	1,031,616
	13	Grants and similar amounts paid (Part IX, column (A), lir			601,320	774,305
	14	Benefits paid to or for members (Part IX, column (A), line	e 4)		0	0
/6	15	Salaries, other compensation, employee benefits (Part I)	X, column (A), lines	5 –		
Expenses		10)			419,527	· ·
₹	16a	Professional fundraising fees (Part IX, column (A), line 1	1e)		22,171	4,950
ă	ь	Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright 123,767				
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11	•		149,671	164,727
	18	Total expenses Add lines 13-17 (must equal Part IX, c	,		1,192,689	1,330,769
	19	Revenue less expenses Subtract line 18 from line 12 .			-244,744	-299,153
5 g					of Current	End of Year
e e e	20	Total acceta (Part V. line 4.6)		 	ear 1 361 906	1 1 2 2 1 2 2
net Assets of Fund Bafances	20	Total assets (Part X, line 16)			1,361,806	<u> </u>
ğ 5	21	Total liabilities (Part X, line 26)			42,124	<u> </u>
	22	Net assets or fund balances Subtract line 21 from line 2			1,319,682	1,093,159
Jndei		Signature Block ties of perjury, I declare that I have examined this return, incluand belief, it is true, correct, and complete. Declaration of prep				
	ledge.	and belief, it is true, correct, and complete. Declaration of prep	alei (other than onic	cer / is based on a	an imormation	i of which preparer has any
		*****		20)12-05-07	
Sign	ı	Signature of officer			ate	
dere		Dennis Morrow Executive Director				
		Type or print name and title				
		Print/Type Preparer's signature	Name Mans		Check if self-	PTIN
Paid		preparer's name Dave Moja D Firm's name Capin Crouse LLP	Dave Moja		employed 🕨	
Prepa	arer L				Firm's EIN	
Jse (Firm's address 🎙 972 Emerson Parkway Ste A				Phone no ► (317) 885-
		Greenwood, IN 46143				2620

May the IRS discuss this return with the preparer shown above? (see instructions) $\ \ .$

(Code) (Expenses \$ 114,914 including grants of \$) (Revenue \$)

Daystar U S currently has three missionary employees for the purpose of using their skill sets to advance the gospel throughout Africa and the world through higher education

Other program services (Describe in Schedule O) See also Additional Data for Description
(Expenses \$ 134,312 including grants of \$ 13,311) (Revenue \$

le Total program service expenses►\$ 1,010,220

4c

521)

Part TV	Checklist	of Regu	ired S	chedules
	CHECKHIST	oi Kegu	nieu 3	ciicuuics

			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? <i>If</i> "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 1	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		Νο
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 quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	
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			
а	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		Νο
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		Νο
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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
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	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
	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? <i>If</i> " <i>Yes,"</i> 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		No
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		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "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		

1 01111	990 (2010)			Page -
Par	t 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 1^7 If "Yes," complete Schedule I, Parts I and II	21		No
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		Νο
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		Νο
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		Νο
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
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		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
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		Νο
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		Νo
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		Νο
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		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes Vo			
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		Νο
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		Νο
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 I	RS Filings	and Tax	Compliance

Pai	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		103	
	1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
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			
ь	return			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the	3a		Νο
b	year?	3b		
- 4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νο
Ь	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		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
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		Νο
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	_		
7	were not tax deductible?	6b		
-	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		Νο
-	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νο
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
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.			
	Did the organization make any taxable distributions under section 4966?	9a 9b		
о 10	Did the organization make a distribution to a donor, donor advisor, or related person?	20		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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			
r	In which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand			
	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N o
Ь	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 an	guestion in this Part VI	_	_	_	_	_	_	_	_	_	. I
Check ii Schedale o	contains a response to an	question in time i art vi	•	•	•	•		•	•		•	-,

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
	year			
b	Enter the number of voting members included in line 1a, above, who are independent			
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	Yes	
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		N o
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
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		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	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		N o
Se	ction B. Policies (This Section B requests information about policies not required by the Internal	,		110
	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
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			
	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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	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)			
	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		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶CA			
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 V Upon request

- 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 🕨 Barry Jones CFO

5701 Normandale Rd No 325

Edina, MN 55424 (952) 928-2550

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

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

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

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, 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	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) Robert Bradley Director	0 00	х						0	0	0
(2) Tom Correll Director	0 00	х						0	0	0
(3) Kerry Dressen Director	0 00	х						0	0	0
(4) Jennifer Harmening Director	0 00	х						0	0	0
(5) Walter Kocemba Director	0 00	х						0	0	0
(6) Marilyn Kredel Director	0 00	х						0	0	0
(7) Robert Lewis Director	0 00	х						0	0	0
(8) Patsy Mogush Director	0 00	х						0	0	0
(9) Dennis Morrow Director	0 00	х						0	0	0
(10) Jake Morrow Director	0 00	х						0	0	0
(11) Steve Richardson Director	0 00	х						0	0	0
(12) Ron Tschetter Director	0 00	х						0	0	0
(13) Paul Virts Director	0 00	х						0	0	0
(14) David Voltmer Director	0 00	х						0	0	0
(15) Florence Muli-Musiime Director	0 00	х						0	0	0
(16) Jay Barnes Director-President	0 00	Х		Х				0	0	0 Form 990 (2010)

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

(A) Name and Title		(B) A verage hours	Posi t	() tion (hat a	(che		II		(D) Reportable compensation from the	(E) Reportable compensatior from related	1	(F) Estima amount o	ated fother
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)		compen: from f organizat relat organiza	the ion and ed
Direc	Gordon Lindquist tor-Chairman	0 00	х		х				0		0		0
	David Brandt tor-Vice Chairman	0 00	Х		х				0		0		0
	Gary Bergren tor-Secretary/Treasurer	0 00	Х		х				0		0		0
	Todd Rasmuson utive Director	50 00			х				90,280		0		10,973
(21) CFO	Barry Jones	50 00			Х				49,600		0		15,939
1b	Sub-Total					•		►					
	Total from continuation sheets t	-				•	-	<u> </u>	139,880		0		26,912
d 	Total (add lines 1b and 1c) Total number of individuals (inclu	 ıdına but not lım									<u> </u>		20,312
	\$100,000 in reportable compens						,						
												Yes	No
3	Did the organization list any form on line 1a? <i>If</i> "Yes," complete Scho				e, ke	y en	nploye	e, oi	r highest compensa	ated employee			_
4	For any individual listed on line 1				• omn	• ensa	ation a	nd o	ther compensation	from the	3		N o
-	organization and related organiza												
5	Individual	ecelve or accrin	· ·	ncat	ion i	• from	• anv II	• inrela	eted organization o	r individual for	4		No
•	services rendered to the organiza									•	5		No
S	ection B. Independent Cont	ractors											
1	Complete this table for your five l \$100,000 of compensation from	-		depe	nde	nt co	ontrac	tors	that received more	than			
	Nam	(A) e and business add	ress						Descri	(B) ption of services		(C Comper	
	Nam	S and business dud	. 555						Descri	paration services		Соптрет	
													_

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 **>**0

	0 (2010)					Р	age 9
rt VI	Statement of Revenu	le		(A) Total revenue	(B) Related or exempt function revenue		(D) Revenuexclude from tax under section
							512, 513, o 514
<u> 2</u> 2 1a	1a Federated campaigns	1a					314
and other similar amounts	b Membership dues	. 1b					
Ĕ.	c Fundraising events	. 1c					
in in	d Related organizations						
Ē							
·교	e Government grants (contributions)	1e			ļ	ļ	ļ
፮ ፣	f All other contributions, gifts, grants, similar amounts not included above	and 1f	1,018,771				
<u>ō</u>	g Noncash contributions included in lir	nes 1a-1f \$	12,482				
ਛ ਜ਼	h Total. Add lines 1a-1f			1,018,771			
			Business Code				
26	2a Other program revenue		900099	521	521		
ן פַ	b						
· ,	c						
į ,	d						
<u> </u>	e						
·	f All other program service rev	zenue					
<u> </u>							
'	g Total. Add lines 2a-2f			521			
3	,	- ·		11,178			11,1
	and other similar amounts) . Income from investment of tax-exe			11,170			11,1
4 5							
	Noyanties	(ı) Real	(II) Personal				
6	5a Gross Rents	(1) 11001	(,				
	b Less rental						
	expenses c Rental income						
	or (loss)						
<u> </u>	d Net rental income or (loss)		(v) 0 Hz v v				
7:	7a Gross amount	(1) Securities 38,675	(II) O ther				
	from sales of assets other						
	than inventory	27.520					
	b Less cost or other basis and	37,529					
	sales expenses c Gain or (loss)	1,146					
	d Net gain or (loss)	<u> </u>	1	1,146			1,1
_	Ba Gross income from fundraisir						
	(not including						
	\$ of contributions reported on I	ine 1c)					
	See Part IV, line 18	•					
		а					
	b Less direct expenses						
_	c Net income or (loss) from fun						
		ctivities See Part IV, line 19 . a					
	b Less direct expensesc Net income or (loss) from gain		ь				
_	10a Gross sales of inventory, les						
	returns and allowances	-					
		а					
	b Less cost of goods sold .	_					
<u> </u>	c Net income or (loss) from sal	es of inventory 🟲	<u> </u>				
-	Miscellaneous Revenue		Business Code				
1	11a 						
	b						
	с						<u> </u>
	d All other revenue						<u> </u>
	e Total. Add lines 11a-11d .						
	13	·					
1.	12 Total revenue. See Instruction	ons -		1 021 616	E21	Ι ,	I 45.

	990 (2010)				Page 10
Par	Statement of Functional Expenses				
А	Section $501(c)(3)$ and $501(c)(4)$ organizations must omplete column (A) but are not required to c			(D).	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21 $$				·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	774,305	774,305		
4	Benefits paid to or for members				_
5	Compensation of current officers, directors, trustees, and key employees	171,487	39,442	82,314	49,731
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	171,167	35,112	32,311	15,7.51
7	Other salaries and wages	139,855	75,598	34,715	29,542
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	55,128	28,748	19,318	7,062
10	Payroll taxes	20,317	7,293	7,703	5,321
а	Fees for services (non-employees) Management				
b	Legal				
c	Accounting	10,080		10,080	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	4,950			4,950
f	Investment management fees				
g	Other				
12	Advertising and promotion				_
13	Office expenses	46,781	30,347	6,330	10,104
14	Information technology				_
15	Royalties				_
16	Occupancy	15,936	5,259	9,562	1,115
17	Travel	37,580	21,447	7,362	8,771
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,730	1,891	3,438	401
23	Insurance	1,596	568	621	407
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)				
а	Miscellaneous	32,114	19,620	7,093	5,401
b	Equipment	14,910	5,702	8,246	962
c					
d					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	1,330,769	1,010,220	196,782	123,767
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) (B) Beginning of year End of year 583,406 1 Cash—non-interest-bearing 88,420 2 436,156 2 Savings and temporary cash investments 279.784 15,988 13,988 3 3 51,348 49,165 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 7 Notes and loans receivable, net 8 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part 84.571 10a VI of Schedule D 10b 74.916 ь Less accumulated depreciation 13,557 **10c** 9,655 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 419,906 532,841 15 15 16 1,361,806 16 1,132,408 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 42.124 17 39.249 17 Accounts payable and accrued expenses . 18 18 19 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 25 Other liabilities Complete Part X of Schedule D 26 42,124 26 39,249 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets -438,119 -402,583 Temporarily restricted net assets 1,028,451 28 1,351,351 28 Fund 406,450 467,291 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 1,319,682 1,093,159 33 Total net assets or fund balances 33 34 Total liabilities and net assets/fund balances 1.361.806 1,132,408 34

Pal	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		1 (31,61
2	Total expenses (must equal Part IX, column (A), line 25)	2		•	330,769
3	Revenue less expenses Subtract line 2 from line 1	3		-2	299,15
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,3	319,68
5	Other changes in net assets or fund balances (explain in Schedule O)	5			72,630
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		1,0	93,159
Par	TEXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			ド	
1	Accounting method used to prepare the Form 990			res	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
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 is on a separate basis, consolidated basis, or both	sued			
	▼ Separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		Νο
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b		

DLN: 93493128014262

Employer identification number

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Daystar US

10

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

Public Charity Status and Public Support

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

95-3732280 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) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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

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)

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

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)

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

An organization that normally receives (1) more than 331/3% 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 331/3% 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)

An organization organized and operated exclusively to test for public safety Seesection 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

Type I **b** Type II c Type III - Functionally integrated Type III - Other

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)

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

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

(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? (ii) a family member of a person described in (i) above?

(iii) a 35% controlled entity of a person described in (i) or (ii) above?

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

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

	under Fait III. II the	e organizacion ra	ans to quanty u	ilder the tests if	sted below, pie	ase co	ilipiete r	art III.)
S	ection A. Public Support	_	_					
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,267,239	2,119,544	1,081,423	953,102	1	1,018,771	6,440,079
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	,						
4	the organization without charge Total. Add lines 1 through 3	1,267,239	2,119,544	1,081,423	953,102	1	1,018,771	6,440,079
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							504,555
	amount shown on line 11, column (f)							
6	Public Support. Subtract line 5 from line 4	ו						5,935,524
S	ection B. Total Support	•	•					
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20	010	(f) Total
7	A mounts from line 4	1,267,239	2,119,544	1,081,423	953,102	1	,018,771	6,440,079
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	21,129	46,665	27,963	17,500		11,178	124,435
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)	10,346	6,207	2,313	7,380			26,246
11	Total support (Add lines 7 through 10)							6,590,760
12	Gross receipts from related activiti	es, etc (See instr	uctions)			12		521
13	First Five Years If the Form 990 is check this box and stop here	for the organization	on's first, second,	third, fourth, or fi	fth tax year as a	501(c)(3		ation, ▶
S	ection C. Computation of Pub	olic Support P	ercentage					
14	Public Support Percentage for 2010			11 column (f))		14		90 060 %
15	Public Support Percentage for 2009	·	·			15		93 630 %
	33 1/3% support test—2010. If the and stop here. The organization quant	alıfıes as a publıcl	y supported orgai	nization				▶ ✓
	33 1/3% support test—2009. If the box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization meeorganization	n qualifies as a pu — 2010. If the orga tion meets the "fa	blicly supported on nization did not c cts and circumst	organization heck a box on line ances" test, chec	e 13, 16a, or 16t k this box and st	o and line	e 14 Explain	▶ ┌
ь 18	10%-facts-and-circumstances test 15 is 10% or more, and if the organiza Explain in Part IV how the organiza supported organization Private Foundation If the organizat	nization meets the tion meets the "fa	"facts and circui cts and circumst	nstances" test, c ances" test The	heck this box and organization qual	d stop he ifies as a	e re. a publicly	▶ □
	instructions			,,	,			▶ □

Schedule A (Form 990 or 990-EZ) 2010 Page 3 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 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

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

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

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

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

Additional Data

Software ID:

Software Version: EIN: 95-3732280

Name: Daystar US

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 134,312 including grants of \$ 13,311) (Revenue \$ 521)

Support for programs designed to provide Christian Ministries Training for those already in career fields, and for programs to provide additional faculty resources, and to provide support for emergency needs and special focus ministries efile GRAPHIC print - DO NOT PROCESS

As Filed Data

DLN: 93493128014262

OMB No 1545-0047

Open to Public Inspection

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.

Employer identification number Name of the organization Daystar US 95-3732280 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised

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

□ No

Part II	Conservation Easements.	Complete if the organizat	on answered	"Yes" to	Form 990,	<u>Part IV,</u>	line 7
Purno	se(s) of conservation easements h	eld by the organization (chec	all that annly)				

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

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

Total number of conservation easements

funds are the organization's property, subject to the organization's exclusive legal control?

Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a)

Number of conservation easements included in (c) acquired after 8/17/06

Held at the End of the Year 2a 2b 2c

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

Number of states where property subject to conservation easement is located 🛌

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨

A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 🕨 \$ ______

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

If the organization elected, as permitted under SFAS 116, 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

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

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2010

Part	Organizations Maintaining Co	llections of Ar	t, His	torical Tr	easur	es, or O	ther	Similar	<u>Asse</u> t	ts (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check ar	ny of th	e following t	hat are	a sıgnıfıca	nt us	e of its coll	ection		
а	Public exhibition		d	Loand	or excha	ange progr	ams				
b	Scholarly research		e	┌ Other							
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	aın hov	v thev furthe	r the or	ganization	's ex	empt purpos	se in		
-	Part XIV			,		9					
5	During the year, did the organization solicit of							lar		_	-
Dar	assets to be sold to raise funds rather than t TIV Escrow and Custodial Arrang							sc" to Forn	<u>Γγ</u>		│ No
Pal	Escrow and Custodial Arrang Part IV, line 9, or reported an an					answere	ı it	יום או	11 990,	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?			•		other ass	ets n	ot	┌ ʏ	ſes	┌ No
b	If "Yes," explain the arrangement in Part XI\	/ and complete the	follow	ıng table		_					
									A mour	nt	
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 Fo	orm 990, Part X, lir	ne 21?						┌ ¥	/es	┌ No
b	If "Yes," explain the arrangement in Part XIV	,									
Pai	rt V Endowment Funds. Complete										
4_	Basining of warmhalana	(a)Current Year 419,906	(b)	Prior Year 363,698	(c)Two	Years Back 361,94	+	Three Years Ba	ick (e)	Four Ye	ears Back
1a L	Beginning of year balance	60,841		13,950		54,66	_		$+\!\!\!-$		
b	Contributions	78,834		42,258		-52,91	+		+		
c d	Grants or scholarships	70,031		12,230		32,51.			+		
e	Other expenditures for facilities	26,740					+		+		
-	and programs	,									
f	Administrative expenses										
g	End of year balance	532,841		419,906		363,69	8				
2	Provide the estimated percentage of the yea	r end balance held	as								
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment 🕨 87 700 %										
c	Term endowment ► 12 300 %										
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	hat are held	and ad	mınıstered	l for t	he	_		
	organization by							_		Yes	No
	(i) unrelated organizations						•	<u> </u>	3a(i)		No
b	(ii) related organizations	ne lieted as require	 .d on S	chedule R2				· · [3a(ii) 3b		No
4	Describe in Part XIV the intended uses of th	•			•		•				
Par	t VI Investments—Land, Buildings	s, and Equipme	nt. S	ee Form 99	90, Par	t X, line	10.				
	December of investment			(a) Cost o	r other	(b)Cost or	other	(c) Accumu	ılated	(d) B	ook value
	Description of investment			basis (inve	stment)	basıs (oth	er)	depreciat	:ion	(u) b	JOK Value
1a	Land										
b E	Buildings										
c l	Leasehold improvements										
d i	Equipment					8	4,571		74,916		9,655
	Other										
Total	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, colu	mn (B)	, line 10(c).)				🛌			9,655
								Schedul	e D (F	orm 99	90) 2010

Part VII Investments—Other Securities. See	Torin 990, Part A, line 1		
(a) Description of security or category (including name of security)	(b) Book value		l of valuation year market value
(1)Financial derivatives		2031 01 0114 01	year market value
(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	e Form 990, Part X, line	13.	
			l of valuation
(a) Description of investment type	(b) Book value		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, III			
(a) Descrip			(b) Book value
(1) Assets held for endowment purposes			532,841
			,
Tabel (Calumn (b) about a roud Farm 0000 Part V and (D) to a			522.041
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1			532,841
Part X Other Liabilities. See Form 990, Part X	(, line 25.		532,841
			532,841
Part X Other Liabilities. See Form 990, Part X	(, line 25.		532,841
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	(, line 25.		532,841
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	(, line 25.		532,841
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	(, line 25.		532,841
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	(, line 25.		532,841
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	(, line 25.		532,841
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Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	(, line 25.		532,841
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	(, line 25.		532,841
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	(, line 25.		532,841
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Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	(, line 25.		532,841
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	(, line 25.		532,841
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	(, line 25.		532,841

للنامير	A. Reconcination of change in Net Assets from Form 550 to Financial Statemen		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,031,616
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,330,769
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-299,153
4	Net unrealized gains (losses) on investments	4	72,630
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	72,630
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-226,523
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	1,104,246
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
Ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	72,630
3	Subtract line 2e from line 1	3	1,031,616
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	1,031,616
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial	1	1,330,769
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	1,330,769
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	1,330,769

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

Part V, line 4, 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

Ident if ier	Return Reference	Explanation
Description of Intended Use of Endowment Funds		Any net gains of interest and dividends earned are designated as funds available for disbursement for scholarships for Daystar University. The Daystar U.S. board, at its spring board meetings, usually votes to distribute 50% of those funds available for disbursement, and they are then disbursed early into the next fiscal year. By distributing less than 100%, usually 50%, the endowment fund assets, in theory, should continue to increase annually, thereby increasing available funds for disbursement year after year.
Description of Uncertain Tax Positions Under FIN 48		The financial statement effects of a tax position taken or expected to be taken are recognized in the financial statements when it is more likely than not, based on the technical merits, that the position will be sustained upon examination. Interest and penalties, if any, are included in expenses in the statement of activities. As of June 30, 2011, Daystar had no uncertain tax positions that qualify for recognition or disclosure in the financial statements.

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As Filed Data -

DLN: 93493128014262

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE F (Form 990)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions. Department of the Treasury Internal Revenue Service

Name of the organization

to Part I

c Totals (add lines 3a and 3b)

Employer identification number

av.	star US					
ау.	star 03				95-3732280	
Pa	rt I General Information	n on Activiti	es Outside th	ne United States. C	omplete if the organiz	ation answered
	"Yes" to Form 990, Pai				p	
	For grantmakers. Does the o	organization m	aintain record:	s to substantiate the	amount of the grants	or
	assistance, the grantees' elig					
	the grants or assistance?		_			✓ Yes
	For grant makers. Describe in Pa United States					ne
	Activites per Region (Use Part \		1		Т	
	(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
	Sub-Saharan Africa	0	2	Grants to recipients located in region		774,305
	Sub-total Total from continuation sheets	0	2			774,305
	ı ı otal irom continuation sneets	1 -	1	i .	1	l

774,305

1

Use Part V if additional space is needed.

(c) Region

(d) Purpose of

(b) IRS code

(i) Method of

(a) Name of organization	section and EIN (if applicable)		grant	cash grant	cash disbursement	of non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Scholarships, special projects, & construction-capital projects	774,305	Wire transfer			
Enter total notal tax-exempt	umber of recipi by the IRS, or f	ent organizations lis or which the grante	ted above that are re e or counsel has prov	ecognized as chariti vided a section 501	es by the foreign c (c)(3) equivalency	ountry, recognized letter	as . ▶	1
B Enter total n	umber of other	organizations or en	tities				. ▶	0
							Schedule	F (Form 990) 2010

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,

(e) A mount of

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

(f) Manner of

(g) A mount of

(h) Description

Part III	Grants and Ot	her Assistance to	Individuals	Outside the Unit	ed States. Complete	ıf the organızatıon a	nswered "Yes" to Form 9	990, Part IV, line 16.
	Use Part V if ad	ditional space is ne-	eded.					

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash	(g) Description of non-cash	(h) Method of valuation
					assistance	assistance	(book, FMV, appraisal, other)
			<u> </u>			1	
			<u>. </u>		!		
			<u>. </u>			1	
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
					!		
			1		,		

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)	Γ	Yes	✓	Νo
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)	Γ	Yes	굣	Νo
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)	Γ	Yes	r	Νo
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)	Г	Yes	r	Νo
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)	Г	Yes	্	Νo
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).	Г	Yes	⊽	Νo

Schedule F (Form 990) 2010

Schedule F (Form 990) 2010

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

ldentifier	Return Reference	Explanation
Procedure for Monitoring Grants Outside the US		Schedule F, Part I, Line 2 Daystar asks the grantee for budgets and account balances for individual scholarship funds to insure appropriate use of funds. They ask the grantee to supply receipts and accounting summaries for capital construction projects and funds, and they ask for verifiable statistics and enrollment numbers for special projects and CMT courses

ldentifier	Return Reference	Explanation
Method Used to Acccount for Expenditures		Schedule F, Part I, Line 3 Daystar receives summary bank statements of the grantee to verify deposits and withdraw als of the money that is wired to the grantee

Schedule F (Form 990) 2010

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As Filed Data -

DLN: 93493128014262

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

Supplemental Information to Form 990 or 990-EZ

► Attach to Form 990 or 990-EZ.

Name of the organization
Daystar US

95-3732280

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		Dennis Morrow is Jake Morrow's uncle Gary Bergren is Dennis Morrow's brother-in- law

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The Form 990 is prepared and reviewed by an independent certified public accounting firm and is presented to the organization's management for review prior to completion. A final copy of the Form 990, as filed with the IRS, is made available to the entire board before it is filed with the IRS.

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section B, line 12c	Board members are required to disclose annually any interests that could give rise to conflicts of interest

Identifier	ntifier Return Reference Explanation	
	Form 990, Part VI, Section B, line 15	The board, comprised of independent individuals, reviews and approves compensation based on reasonable and comparable marketplace compensation data. These deliberations are noted in the corporate minutes.

ldentifier	Return Reference	Explanation
	Form 990, Part VI, Section C, line 19	These documents are available upon request

ldentifier	Return Reference	Explanation
Changes in Net Assets or Fund Balances	Form 990, Part XI, line 5	Net unrealized gains on investments 72,630

ldentifier	Return Reference	Explanation	
		Form 990, Part XII, Line 2c The organization has a committee that assumes responsibility for oversight of the audit of its financial statements and selection of an independent accountant. This process has not changed from the prior year.	