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Return of Private Foundation

OMB No 1545-0052

or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2011 or tax year beginning , 2011, and ending Name of foundation A Employer identification number BURNT FORK MINISTRY 20-0065328 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) (406) 777 - 1670P.O. BOX 29 City or town, state, and ZIP code If exemption application is pending, check here STEVENSVILLE, MT 59870 G Check all that apply Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization If private foundation status was terminate Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust under section 507(b)(1)(A), check here . Fair market value of all assets at end J Accounting method | X Cash | If the foundation is in a 60-month termination of year (from Part II, col (c), line Other (specify) under section 507(b)(1)(B) check here . (Part I, column (d) must be on cash basis ) *16)* ▶ \$ 2,599. Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per income may not necessarily equal the amounts in income purposes books column (a) (see instructions) ) (cash basis only) 265,199. Contributions, gifts, grants, etc., received (attach schedule) if the foundation is not required to 2 Check > attach Sch B . . . . . . . . . 3 Interest on savings and temporary cash investments Dividends and interest from securities **5a** Gross rents . . . . . . . . . . . . . . . . . **b** Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain . . . . . . . . . Income modifications 10 a Gross sales less returns and allowances . b Less Cost of goods sold c Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 9 265,199 S Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salanes and wages . . . . . Expenses 15 Pension plans, employee benefits . . . . . .  $3,\overline{537}$ 3,537. 16 a Legal fees (attach schedule) ATCH 1 3,000. 3,000 **b** Accounting fees (attach schedule) ATCH 2 c Other professional fees (attach schedule) . . . **SS** Administrative 17 Taxes (attach schedule) (see instructions) . . . . . 18 19 Depreciation (attach schedule) and depletion . 20 39,617. 39,617. Travel, conferences, and meetings . . . . . . Printing and publications . . . . 220,113. 220,113. Other expenses (attach schedule) ATCH. 3. Total operating and administrative expenses. 266,267 266,267. Add lines 13 through 23 300 300 Contributions, gifts, grants paid . . . . . . 25 266,567. 266,567 26 Total expenses and disbursements. Add lines 24 and 25 27 N Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements . . -1,3680 b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-). For Paperwork Reduction Act Notice, see instructions.

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Part II		Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	l of year	
_	ant II	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value	
1	1	Cash - non-interest-bearing	3,967.	2,599.	2,599.	
	2	Savings and temporary cash investments		<u> </u>	-	
	3	Accounts receivable				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
		Receivables due from officers, directors, trustees, and other			-	
		disqualified persons (attach schedule) (see instructions)				
		Other notes and loans receivable (attach schedule)				
	′	Less allowance for doubtful accounts				
	_					
şţ	8	Inventories for sale or use			<del></del>	
Assets		Prepaid expenses and deferred charges				
⋖		Investments - U S and state government obligations (attach schedule)				
		Investments - corporate stock (attach schedule)				
	11 C	Investments - corporate bonds (attach schedule)				
		Investments - land, buildings, and equipment basis  Less accumulated depreciation (attach schedule)				
	12	Investments - mortgage loans				
		Investments - other (attach schedule)				
	14	Land, buildings, and				
		Land, buildings, and equipment basis Less accumulated depreciation				
	15	equipment basis Less accumulated depreciation (attach schedule)				
		Other assets (describe  Total assets (to be completed by all filers - see the				
			3,967.	2 500	2,599.	
_				2,399.	2,333.	
		Accounts payable and accrued expenses	u u			
		Grants payable				
ties	19	Deferred revenue				
ij	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities		Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe				
_	23	Total liabilities (add lines 17 through 22)				
		Foundations that follow SFAS 117, check here ► and complete lines 24 through 26 and lines 30 and 31.				
Š		Unrestricted				
nce	25	Temporarily restricted		•		
ala	24 25 26 27 28 29 30 31	Permanently restricted				
B	20	-	-			
иĽ		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.				
ī	27					
30	21	Capital stock, trust principal, or current funds				
et	28	Paid-in or capital surplus, or land, bldg, and equipment fund	3,967.	2,599.		
Ass	29	Retained earnings, accumulated income, endowment, or other funds	3,967.	2,599.		
et ,	30	Total net assets or fund balances (see instructions)	3,901.	2,399.		
Z		Total liabilities and net assets/fund balances (see	2 067	2 500		
		instructions)	3,967.	2,599.		
		Analysis of Changes in Net Assets or Fund				
1		net assets or fund balances at beginning of year - Part			2 2 2 2	
					3,967.	
		amount from Part I, line 27a	2	-1,368.		
3	Othe	r increases not included in line 2 (itemize)	3			
4	Add !	ines 1, 2, and 3	1 -	2,599.		
5	Decre	anno maturali idad in lino 2 (damina) is		_		
6	Total	net assets or fund balances at end of year (line 4 minus line	5) - Part II, column (b), li	ne 30 6	2,599.	

D	٠
Pane	

P	art IV Capital Gains	and Losses for Tax on In	vestment Income			
		d describe the kind(s) of property sold once warehouse, or common stock, 200		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a						
b	)	<del> </del>				
C						ļ <del> </del>
d	· · · · · · · · · · · · · · · · · · ·			_		
е	<u>'                                      </u>	(f) Depreciation allowed	(g) Cost or other basis	ļ	/h) Com or //c	
	(e) Gross sales price	(i) Depreciation allowed (or allowable)	plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>					<del>-</del>	· <del></del>
b	· <del></del>					
C						
_d e						
		howing gain in column (h) and owned	by the foundation on 12/31/69		Corp. (Col. (b) c	
_		(j) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) g (k), but not less t	
	(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
<u>a</u>						
<u>_b</u>		<u> </u>				
_C						
_ d						
3	If gain, also enter in Par	net capital loss)  or (loss) as defined in sections 122  t I, line 8, column (c) (see ins	structions) If (loss), enter -0- in	2		
				3		
Wa		ne section 4942 tax on the distribu	table amount of any year in the base	period?		Yes No
_		ot qualify under section 4940(e)				
1		unt in each column for each year,	see the instructions before making ar	ny entries		
С	(a) Base penod years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ra (col (b) divided by	
	2010					
_	2009					
	2008					
	2007					=
_	2006			<del> </del>		
2	-	or the 5-year base period - divide the sation has been in existence if less	the total on line 2 by 5, or by the	3		
1	Enter the net value of nonc	charitable-use assets for 2011 fron	n Part X, line 5	4		· · -
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investment	t income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
8	Enter qualifying distribution If line 8 is equal to or gre Part VI instructions		in Part VI, line 1b, and complete 1	8 that part	using a 1% tax	x rate See the

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instr	uctio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here  and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2			0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			0
6	Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 6a			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be  Credited to 2012 estimated tax ▶			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	_No
	or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			
	instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities			
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation   \$\Bigsis \square\$ (2) On foundation managers   \$\Bigsis \square\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<u>X</u> _
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		.,,
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or		-	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		.,	
	conflict with the state law remain in the governing instrument?	6	$\frac{x}{x}$	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)  MT, OH,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G?If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			
	Part XIV	9	Χ	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses	10		X

Pai	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12				
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address   N/A			
14	The books are in care of ► KAY A. CREECH  Telephone no ► 406-777	-167	0	
	Located at ▶P.O. BOX 29 STEVENSVILLE, MT ZIP+4 ▶ 59870			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	$\cdot \Box$
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			
	the foreign country			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Ì		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	ŀ		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
ŧ	of If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			
•	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2011?	1c	ļ	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		1	
ē	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2011?	ł		
	If "Yes," list the years			
k	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	-		
	all years listed, answer "No" and attach statement - see instructions )	2b	<u> </u>	
(	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	• · · · · ·_ · · · ·			
3 8	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		1	
	at any time during the year?			
t	b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			1
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	1		
	foundation had excess business holdings in 2011)	3b	<del> </del>	
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	X
t	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		1	,
	charitable purpose that had not been removed from jeonardy before the first day of the tax year beginning in 2011?	l 4h	1	l X

2 Compensation of five highest-paid employees "NONE."	(other than thos	l se included on line	 e 1 - see instructi	ions). If none, ente
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000 .				▶

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
AMMA CUMPNM E	204,144
ATTACHMENT 5	
Total number of others receiving over \$50,000 for professional services	NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct chantable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 CHRISTIAN RETREATS - SEE FOOTNOTES	
·	227,941
2	221, 941
3	
<b>-</b>	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See instructions	
3 NONE	
Total. Add lines 1 through 3	

Form 990-PF (2011) Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, Part X see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes Average monthly fair market value of securities 1a 1b 2,240. c Fair market value of all other assets (see instructions) 1c Total (add lines 1a, b, and c) 1d 2,240. Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 3 3 2,240. Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see 4 34. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 2,206. Minimum investment return. Enter 5% of line 5 110. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here \rightarrow \times \rightarrow \times and do not complete this part) Minimum investment return from Part X, line 6 . . . . . . . . . 2a Tax on investment income for 2011 from Part VI, line 5 Income tax for 2011 (This does not include the tax from Part VI) 2b Add lines 2a and 2b 2c Distributable amount before adjustments Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, Part XII Qualifying Distributions(see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 266,567. h Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b . . . . . . . . . . . . . . . . . Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 266,567. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Form 990-PF (2011)

Enter 1% of Part I, line 27b (see instructions) Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

## BURNT FORK MINISTRY

Form 990-PF (2011) Page **9** 

Pa	Part XIII Undistributed Income (see instructions)							
	,	(a)	(b)	(c)	(d)			
1	Distributable amount for 2011 from Part XI,	Corpus	Years pnor to 2010	2010	2011			
	line 7							
2	Undistributed income, if any, as of the end of 2011			,				
а	Enter amount for 2010 only				<u> </u>			
b	Total for prior years 20,20,20							
3	Excess distributions carryover, if any, to 2011							
а	From 2006							
	From 2007							
	From 2008							
	From 2009							
	From 2010							
	Total of lines 3a through e							
	Qualifying distributions for 2011 from Part XII, line 4 ▶ \$							
а	Applied to 2010, but not more than line 2a				<del></del>			
þ	Applied to undistributed income of prior years (Election required - see instructions)							
С	Treated as distributions out of corpus (Election required - see instructions)							
d	Applied to 2011 distributable amount							
	Remaining amount distributed out of corpus				-			
5	Excess distributions carryover applied to 2011							
6	(If an amount appears in column (d), the same amount must be shown in column (a) )  Enter the net total of each column as indicated below:							
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5			·				
b	Prior years' undistributed income Subtract line 4b from line 2b							
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed							
đ	Subtract line 6c from line 6b Taxable amount - see instructions							
е	Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see instructions							
f	Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012							
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)							
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)							
9	Excess distributions carryover to 2012.							
40	Subtract lines 7 and 8 from line 6a							
	Analysis of line 9 Excess from 2007							
	Excess from 2007							
	Excess from 2009							
	Excess from 2010							
	Excess from 2011							

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

ATTACHMENT 8
JSA
1E1490 1 000

factors

Form **990-PF** (2011)

NOT DEVELOPED TO DATE, PLEASE CONTACT KAY A. CREECH

Page **11** 

Part XV Supplementary Information (	continuea)						
3 Grants and Contributions Paid During the Year or Approved for Future Payment  Recipient Secupient Secupi							
Name and address (hame as hypnoss)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount			
a Paid during the year	or substantial contributor	recipient					
a Palu during the year							
ATTACHMENT 9							
ATTACIMENT 9							
Total				300.			
b Approved for future payment	<u> </u>	<del></del>	l l l l l l l l l l l l l l l l l l l				
, p							
		<u> </u>					
Total			▶ 3b				

Part XVI-	A Analysis of Income-Produ	ucing Acti	ivities			
Inter gross a	amounts unless otherwise indicated	Unrela (a)	ated business income (b)	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a						
		<u> </u>				
_						
e	<del></del>					
g Fees	and contracts from government agencies	,				
-	ship dues and assessments	_				
	n savings and temporary cash investments					
Dividend	s and interest from secunties					
Net renta	al income or (loss) from real estate					
a Debt-	financed property					
	ebt-financed property					
	income or (loss) from personal property .					
	restment income					
•	oss) from sales of assets other than inventory					
	me or (loss) from special events					
	ofit or (loss) from sales of inventory					
	venue a					
е						
Subtotal	Add columns (b), (d), and (e)					
	dd line 12, columns (b), (d), and (e)				13	
	eet in line 13 instructions to verify calcula					
art XVI-	Relationship of Activities	to the Ac	complishment of E	xempt Purp	oses	
Line No. <b>▼</b>	Explain below how each activity accomplishment of the foundation					
N/A	NOT APPLICABLE					
.,,	No. 1 THE BEGINS					
			•			
				- <u></u>	· · · · · · · · · · · · · · · · · · ·	
				· · · · · · · · · · · · · · · · · · ·		
	·					
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						*** *** * ***
-	<u> </u>	<del></del>				
		<del> </del>			<del> </del>	
						_
			•			

JSA 1E1492 1 000

Part	XVII	Information R Exempt Organ		ansfers To and T	ransact	ions a	and Relation	iships '	With Non	char	itabl	е
1	Did the			engage in any of the	following	with a	any other organ	nızatıon	described		Yes	No
		-	-	section 501(c)(3) or	_							
		zations?	( (		<b>J</b>	,			- p			
	_		foundation to a	noncharitable exemp	t organizat	ion of						
					_					1a(1)		X
										1a(2)		X
		ransactions								15(-7	·	1
			charitable even	pt organization						1b(1)		X
	(1) Dui (2) Piu	rchases of assets from	n a noncharitab	le exempt organizatio	 n					1b(2)		Х
				assets						1b(3)	_	Х
	(4) Re	imbursement arrance	ments							1b(4)		Х
										1b(5)		Х
				or fundraising solicite						1b(6)		Х
				, other assets, or paid						1c		X
				es," complete the fol							fair m	arke
				ces given by the rep	_				•			
		-		gement, show in col	_							
(a) Lir		(b) Amount involved		oncharitable exempt organi	<del>,</del>	-	escription of transfe					
(,		N/A	(0)			N/A					3	
		.,,										
	+											
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	<u> </u>	£		Chatad with an artat					-1	· · · · · · · · · · · · · · ·		
		•	•	filiated with, or relat	-		•	organiz	ations F	<del>-</del> ا ر	es X	٦.,,
				ther than section 501	(c)(3)) or	ın secti	on 52//		L	Y •	es <u> </u>	] 100
D	ii res	complete the follow  (a) Name of organization		(b) Type of org		•		a) Decement	on of relationsh			
		(a) Name of organization		(b) Type of org	anization		•	c) Descript	ion of relations	יי <b>י</b>		
		···										
	Linda	nonaltine of manuar 1 design	3 that I have access	and this entire indiction		hodules -	nd statements and t	a the heat	of my baseds ===	- ord -	oliof :	.n. to
Sign	соптес	t, and complete Declaration of	f prepare) (other than t	ned this return, including act axpayer) is based on all informa	ution of which p	reparer ha	nu statements, and t is any knowledge	o une dest		= and C	ener, it	is true
_		KHEMA		14-11	12		+ 0.06	_		discus		retum
Here		preced	<del></del>		10	T:#2	residence			eparer	- п	below
	Sigr	nature of officer or trustee	\	Date		ille *			(see instructions	s)? [X	Yes	No
		Print/Type preparer's	name	Preparer's signatur	e, , , ,	 ⊃∩	12.φ <b>9.26</b> 19:55	.37	TF	PTIN		
Paid		D. DWIGHT G		U. On	pht &1.10		112.43. <del>20</del> 19.55 4'00'	10.,	eck if		ccc	
Prep	arer			1 110	<i>'</i>	-04	7 04		f-employed			<u> </u>
	Only		OWE HORWAT					Firm's El	N ► 35-09	1216	30	
Jac	Unity	Firm's address ▶ 30										
		EL	KHART, IN			4	6516-3115	Phone no	o 574-29	15-19	991	

## Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2011

BURNT FORK MINISTRY		Employer identification number				
	20-0065328					
Organization type (check one)						
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private found	dation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation	ı				
	501(c)(3) taxable private foundation					
	red by the General Rule or a Special Rule. ), or (10) organization can check boxes for both the General Rule and a Spe	ecial Rule See				
X For an organization filin	g Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or mo contributor Complete Parts I and II	ore (in money or				
Special Rules						
under sections 509(a)(1	organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of and 170(b)(1)(A)(vi) and received from any one contributor, during the year of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990.	ar, a contribution of				
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III						
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.						
990-EZ, or 990-PF), but it must a	ot covered by the General Rule and/or the Special Rules does not file Sche answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of so certify that it does not meet the filing requirements of Schedule B (Form 9	its Form 990-EZ or on				
For Paperwork Reduction Act Notice. see	e the Instructions for Form 990, 990-EZ, or 990-PF. Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2011)				

Name of organization BURNT FORK MINISTRY

Employer identification number 20-0065328

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1_	RANDOLPH CREECH P.O. BOX 29 STEVENSVILLE, MT 59870	\$125,850.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2_	KAY CREECH P.O. BOX 29 STEVENSVILLE, MT 59870	125 050	Person   X     Payroll     Noncash     (Complete Part II if there is a noncash contribution )		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
<b></b>		\$ \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution )		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution )		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution )		

Name of organization BURNT FORK MINISTRY

Employer identification number

20-0065328

Part II Nonca	ash Property (see instructions). Use duplicate copie	s of Part II if additional space is ne	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		    \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		     \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization BURNT FORK MINISTRY

Employer identification number

20-0065328

For o contri	otal more than \$1,000 for the year rganizations completing Part III, en butions of \$1,000 or less for the y duplicate copies of Part III if addition	ter the total of <i>exclus</i> rear (Enter this inform	ively religious, c	haritable, etc ,
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	jift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer o	_	ship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	jift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer o	_	ship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	jift	(d) Description of how gift is held
	(e) Transferee's name, address, and ZIP + 4		•	ship of transferor to transferee
a) No.	(b) Purpose of gift	(c) Use of g	gift	(d) Description of how gift is held
Part I		(e) Transfer o		
	Transferee's name, address, and			ship of transferor to transferee

Part III Exclusivelyeligious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations

## FORM 990PF, PART I - LEGAL FEES

CHARITABLE <u>PURPOSES</u>	3,537.
ADJUSTED NET INCOME	
NET INVESTMENT INCOME	
REVENUE AND EXPENSES PER BOOKS	3,537.
	TOTALS
DESCRIPTION	LEGAL FEES

## - ACCOUNTING FEES PART I FORM 990PE,

CHARITABLE PURPOSES	3,000.	3,000.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	3,000.	3,000.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

# FORM 990PF, PART I - OTHER EXPENSES

BURNT FORK MINISTRY

CHARITABLE	PURPOSES 2,925.	9,736.	154.	204,144.	199.	814.	2,141.	220,113.
ADJUSTED NET	INCOME							
NET INVESTMENT	INCOME							
REVENUE AND EXPENSES	PER BOOKS 2,925.	9,736.	154.	204,144.	199.	814.	2,141.	220,113.
								TOTALS
	<u>DESCRIPTION</u> LIBRARY	MEALS & ENTERTAINMENT	SUPPLIES	CONTRACT SERVICES	DUES & FEES	INSURANCE	MEDICAL EXPENSE	

EXPENSE ACCT AND OTHER ALLOWANCES	<b>'</b> 0	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0	0	0
COMPENSATION	0	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	SECRETARY-TREASURER 1.00	PRESIDENT 1.00	VICE PRESIDENT 1.00	GRAND TOTALS
NAME AND ADDRESS	KAY A. CREECH P.O. BOX 29 STEVENSVILLE, MT 59870	RANDOLPH S. CREECH P.O. BOX 29 STEVENSVILLE, MT 59870	ROSS SHOE P.O. BOX 29 STEVENSVILLE, MT 59870	

BURNT FORK MINISTRY

20-0065328

## 990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALS

ATTACHMENT 5

NAME AND ADDRESS

TYPE OF SERVICE

COMPENSATION

BURNT FORK, LLC P.O. BOX 29 STEVENSVILLE, MT 59870 MANAGEMENT SERVICES

204,144.

TOTAL COMPENSATION

204,144.

## FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

KAY A. CREECH RANDOLPH S. CREECH

## FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

KAY A. CREECH P.O. BOX 29 STEVENSVILLE, MT 59870 406-777-1670

## 990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

THE SERVICES WILL BE OFFERED TO PASTORS, MISSIONARIES, CHURCH WORKERS, CHRISTIAN EDUCATORS AND ORGANIZATIONS WHO WILL BENEFIT FROM THE FOUNDATION'S PROGRAMS OF RETREAT, EDUCATION, PRAYER, TRAINING, AND AND SPIRITUAL RENEWAL. THE ONLY CRITERIA FOR SELECTION IS THAT THE RECIPIENT BE AN INDIVIDUAL OR ORGANIZATION INVOLVED WITH MINISTRY SUPPORT IN ONE OF THESE CAPACITIES.

20-0065328

BURNT FORK MINISTRY

FORM 990 PF

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

300

AMOUNT

ATTACHMENT 9

LIGONIER MINISTRIES 421 LIGONIER COURT SANFORD, FL 32771

RECIPIENT NAME AND ADDRESS

509(A)(1)

NONE

CHARITABLE MINISTRY

TOTAL CONTRIBUTIONS PAID

PAGE 26

ATTACHMENT 9

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## FEDERAL FOOTNOTES

PART IX-A - SUMMARY OF DIRECT CHARITABLE ACTIVITIES

CHRISTIAN RETREATS - RETREATS PROVIDED TO PASTORS, MISSIONARIES, CHURCH WORKERS AND CHRISTIAN EDUCATORS AS A TIME OF EDUCATION, PRAYER, REST, RELAXATION AND RENEWAL. THE ORGANIZATION ALSO PLANS GROUP ACTIVITIES AND ARRANGES SPEAKERS. BURNT FORK MINISTRY HOSTED 314 PARTICIPANTS IN 2011. THE FACILITIES ARE ALSO PROVIDED TO NONPROFIT RELIGIOUS ORGANIZATIONS WHO COME WITH THEIR OWN AGENDA.

SINCE THE MISSION OF THE ORGANIZATION IS TO PROVIDE A PLACE OF RETREAT FOR THOSE INVOLVED IN MINISTRY, THE SERVICES PROVIDED BY BURNT FORK LLC ARE ASSISTING THE FOUNDATION WITH ACHIEVING THIS MISSION. BURNT FORK LLC SERVICES INCLUDE MANAGERIAL, SUPERVISORY SERVICES OVER THE ACTIVITIES AT THE RANCH, ACCOUNTING AND CONSULTING SERVICES.