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_{Form} 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation 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

OMB No 1545-0052

2011

Fo	r ca	ıle	ndar year 2011 or tax year beginning	, a	and ending			
Na	me d	of fo	oundation			A	Employer identification n	umber
IM	PAC	T	INTERNATIONAL, INC.				35-2116	S040
			nd street (or P O box number if mail is not delivered to street ac	ddress)	Room/suite	В	Telephone number (see ins	
59	555	C	OUNTY ROAD 3			1	(574) 287	-7690
Ci	ty or	tow	n, state, and ZIP code			C II	exemption application is p	
EL	KHA	٩R	T	IN	46517	"	onempoon application to p	criding, cricck here
G	Ch	ec	k all that apply: Initial return Initi	al return of a former		D 1	. Foreign organizations, ch	eck here ▶
				ended return		l		
			Address change Nar	ne change		′	 Foreign organizations me check here and attach co 	
H	Ch	ec	k type of organization. X Section 501(c)(3) exe		ion	1 _		
r	_		ion 4947(a)(1) nonexempt charitable trust	•			private foundation status winder section 507(b)(1)(A), o	
느						1		
1			market value of all assets at end J Accounting ar (from Part II, col. (c),		h Accrual		the foundation is in a 60-m nder section 507(b)(1)(B), of	
			6) ►\$ 3,469 (Part I, column (sis)	ľ	11001 30011011 001 (b)(1)(b), (Sheck field
Pa	rt l	_	Analysis of Revenue and Expenses (The total of	T	T	1	<u> </u>	(d) Disbursements
-		•	amounts in columns (b), (c), and (d) may not necessarily equal	(a) ive serioe and	(b) Net investm	ent	(c) Adjusted net	for charitable
			the amounts in column (a) (see instructions))	books	income		income	purposes
_	1	_	Contributions, gifts, grants, etc., received (attach schedule)	7,323	· 人名英格兰	ريد ج) المو	A Transfer of the State of the	(cash basis only)
	2		Check ▶ if the foundation is not required to attach Sch B		CONTRACTOR OF	. ,		
	3		Interest on savings and temporary cash investments	0	THE BOAT DO THE SEA	C		
	4		Dividends and interest from securities .	0			· · · · · · · · · · · · · · · · · · ·	
	5		Gross rents			0)	1.
4	ļ	b	Net rental income or (loss)	C. Carlo Strain Strain Strain	Capt of the 2 mg	Se of		
ĕ	6		Net gain or (loss) from sale of assets not on line 10	0	建度等度等	7	The state of the s	2.703 7.1
/er		_	Gross sales price for all assets on line 6a 0	おお は は なる ままかけ	在诗学观点	JF	建设建筑设置	11 ge : 1 1 1 1 1
Revenue	7		Capital gain net income (from Part IV, line 2)	表表现表现语言		0	277 - 235	3 6 2 6
	8		Net short-term capital gain	表了了并是否的原则	使严阳连接以	ę., -	0	
	9		Income modifications	Property of the second	型程學學是 望	ا چوالاستان کې		. 75.
	10	а	Gross sales less returns and allowances 0	等常研究主義科學	是是是其他		學的社会	
		b	Less Cost of goods sold 0	3、最近的大学	day in the	31.7		
			Gross profit or (loss) (attach schedule)	0		1,747		
	11		Other income (attach schedule)	0		0	0	
	12		Total. Add lines 1 through 11	7,323		0	0	٠
S	13		Compensation of officers, directors, trustees, etc	0				
enses	14		Other employee salaries and wages EIVED	<u> </u>				
be	15		Pension plans, employee penefits Legal fees (attach schedule) MAY 1 4 2012					
Exp	16	a	Legal fees (attach schedule) MAY 1 4 2012	509		0		
		b.	Legal fees (attach schedule) MAY 1 4 2012 Accounting fees (attach schedule) Other professional fees (attach schedule)	0		0		
Administrative		С	Other professional fees (attach schedule) Interest OGDEN, UT	0		0	0	0
ř				J	ļ		 	
Ę.	18 19		Taxes (attach schedule) (see instructions)	0		<u>0</u> 0	 	
Ξ	20		Depreciation (attach schedule) and depletion	0			0	T. 15 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
Adr	21		Occupancy Travel, conferences, and meetings	170				
℧	22		Printing and publications	37	<u> </u>			
an	23		Other expenses (attach schedule)	3,202		0		
ng	24		Total operating and administrative expenses.	3,202			0	0
erating	~~		Add lines 13 through 23	3,918		٨	^	_
	25		Contributions, gifts, grants paid	5,500			\$ 15 m 20 m 20 m	5,500
Ö	26		Total expenses and disbursements. Add lines 24 and 25	9,418		0	^	
<u>-</u>	27		Subtract line 26 from line 12	9,410 	The same of	<u>U</u>	0	5,500
D 28			Subtract line 20 from line 12 Excess of revenue over expenses and disbursements	-2,095		grandi. Grand		
			Net investment income (if negative, enter -0-)	-2,095	<u> </u>	0		
D			Adjusted net income (if negative, enter -0-)		100 LES 5 5 10 10	12,		
				<u>Latinities in Laboration in the lateral contractions in the lateral contraction contractions in the lateral contraction contractions in the lateral contraction contraction contractions in the lateral contraction contraction contraction contractions in the lateral contraction contracti</u>	1.5 - 3.5 - 1	3.75	l 0	

1 Cash - non-interest-bearing	Рa	rt II		Attached schedules and amounts in the description column	Beginning of year	End (of year
2 Savings and temporary cash investments 3 Accounts receivable 1 Pleadges receivable 2 A Pleadges receivable 3 Accounts receivable 4 Pleadges receivable 5 Grants receivable 6 Receivables due from officers, directors, frustees, and other disqualified persons (affact schedule) (see instructions) 7 Other notices and loans receivable 8 Inventiones for sale or to the deferred charges 10 a Investments—Us a relate government displants (affact schedule) 10 investments—Us and state government displants (affact schedule) 10 investments—used postages and deferred charges 10 a Investments—Us a drast set government displants (affact schedule) 10 investments—used postages and deferred charges 10 a Investments—used postages and deferred charges 10 a Investments—used postages and deferred postages and deferred charges 11 investments—emprage loans 12 investments—ordprate bonds (affacts schedule) 12 investments—ordprate bonds (affacts schedule) 13 investments—ordprate bonds (affacts schedule) 14 Land, buddings, and equerement bass ▶ 15 Other assates (describe ▶ 16 Total assasts (to be completed by all filers—see the instructions Also, see page 1, item 1) 15 Other assates (describe ▶ 16 Total assasts (to be completed by all filers—see the instructions Also, see page 1, item 1) 15 Other assates deferred by an accrused expenses 17 Accounts payable and accrused expenses 18 Grants payable 20 Union familiative (affact) and other others payable (affact) schedule) 19 Other habitities (affact) and other others payable (affact) schedule) 10 Other habitities (affact) and other others payable (affact) schedule) 10 Other habitities (affact) and other others payable (affact) schedule) 10 Other habitities (affact) and other others payable (affact) schedule) 10 Other habitities (affact) and other others		,		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
Accounts receivable		1	Cash—non-interes	st-bearing	5,565	3,469	3,469
Less allowance for doubtful accounts		2	Savings and tempor	orary cash investments			
Pleagage receivable		3	Accounts receivab	le ▶0	أدو متنتيم أبيار أبيار أنوار والمراز والمراز	经实验的 一连小	ret Oktobally
Less allowance for doubtful accounts			Less allowance fo	r doubtful accounts	0	0	0
Signats receivable		4	Pledges receivable	• ▶			7.
Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 0			Less allowance fo	r doubtful accounts	0	0	0
disqualified persons (attach schedule) (see instructions)		5	Grants receivable		····		
The context and soans receivable (statch schedule)		6	Receivables due fr	om officers, directors, trustees, and other			
Less allowance for doubtful accounts ▶ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			disqualified person	s (attach schedule) (see instructions)	0	0	0
8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10 a Investments—Corporate stock (attach schedule) 0 investments—Corporate stock (attach schedule) 0 investments—Corporate bonds (attach schedule) 0 in		7	Other notes and loans	s receivable (attach schedule)		F (5 ·
b Investments—corporate stock (attach schedule)		1	Less allowance for do	oubtful accounts D	0	0	0
b Investments—corporate stock (attach schedule)	ţ	8	Inventories for sale	e or use			
b Investments—corporate stock (attach schedule)	Se	9	Prepaid expenses	and deferred charges			
b Investments—corporate stock (attach schedule)	As	10 a	I Investments—US and	d state government obligations (attach schedule)	0	0	0
11 Investments—land, buildings, and equipment basis		į t	Investments—corp	porate stock (attach schedule)	0	0	0
Less accumulated deprecation (attach schedule)			Investments-corp	orate bonds (attach schedule) .	0	0	0
12 Investments—ontrigage loans		11	Investments—land, bu	uildings, and equipment basis		and the second	
13 Investments—other (attach schedule) 0 0 0 0 14 Land, buldings, and equipment basis			Less accumulated de	epreciation (attach schedule)	. 0	0	0
14		12	Investments-mort	tgage loans			
Less accumulated depreciation (attach schedule) ▶ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		13	Investments—othe	er (attach schedule)	0	0	0
15 Other assets (describe		14	Land, buildings, an	id equipment basis ▶0			
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I) 5,565 3,469 3,469 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other noles payable (attach schedule) 22 Other liabilities (describe ►) 0 0 0 23 Total liabilities (add lines 17 through 22) 0 0 Foundations that follow SFAS 117, check here and complete lines 24 through 28 and lines 30 and 31. 24 Unrestricted 25 Temporanly restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total liabilities and net assets/fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 4 Analysis of Changes in Net Assets or Fund Balances 5 Total reases not included in line 2 (itemize) ▶ Rounding Difference 5 1 Decreases not included in line 2 (itemize) ▶ Rounding Difference 5 1 Decreases not included in line 2 (itemize) ▶ Rounding Difference 5 1 Decreases not included in line 2 (itemize) ▶ Rounding Difference 5 1 Decreases not included in line 2 (itemize) ▶ Rounding Difference 5 1 Decreases not included in line 2 (itemize) ▶ Rounding Difference			Less accumulated de	epreciation (attach schedule)	0	0	0
Instructions Also, see page 1, item I) 5,565 3,469 3,469		15	Other assets (desc	onbe ▶)	0	0	0
17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ►) 0 0 0 23 Total liabilities (add lines 17 through 22) 0 0 0 Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporanly restricted 26 Permanently restricted 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 4 Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 4 Enter amount from Part I, line 27a 5 Other inabilities and 3 6 Add lines 1, 2, and 3 7 Decreases not included in line 2 (itemize) ► Rounding Difference 5 1 Decreases not included in line 2 (itemize) ► Rounding Difference 5 1 Decreases not included in line 2 (itemize) ► Rounding Difference 5 1 Decreases not included in line 2 (itemize) ► Rounding Difference		16	Total assets (to be	e completed by all filers—see the		-	
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Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) Rounding Difference 5 1	SS	29	Retained earnings,	accumulated income, endowment, or other funds			
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) Rounding Difference 5 1	¥	30			5,565	3,469	• · · · · · · · · · · · · · · · · · ·
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) Rounding Difference 5 1	Š	31		nd net assets/fund balances (see			· •
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3 Other increases not included in line 2 (itemize) ▶ 3 0 4 Add lines 1, 2, and 3 . 4 3,470 5 Decreases not included in line 2 (itemize) ▶ Rounding Difference 5 1							
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5 Decreases not included in line 2 (itemize) ► Rounding Difference 5 1	3	Other	increases not includ	led in line 2 (itemize)			0
						 	3,470
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 3,469							1
	6	Total	net assets or fund ba	alances at end of year (line 4 minus line 5)—Part II, co	olumn (b), line 30	. 6	3,469

• •	e kind(s) of property sold (e g , real estate, se, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr)
1a						
b						
c						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale			or (loss)) minus (g)
a0	0		0			C
<u>b</u> 0	0	. <u> </u>	0			
c 0	0		0			C
d 0	0		0			C
e 0	0		0			C
Complete only for assets show	ving gain in column (h) and owned by	the foundation	on on 12/31/69	(1)	Gains (Col	(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (ı) l (j), ıf any		(k), but not	less than -0-) or om col (h))
a 0	0		0			C
b 0	0		0			C
c 0	0		0			C
d 0	0		0			0
e 0	0		0			0
2 Capital gain net income or	(net capital loss) { If gain, also If (loss), en			2		0
, ,	or (loss) as defined in sections 1	222(5) and	(6):			
ın Part I, line 8	line 8, column (c) (see instruction	•		3		0
If section 4940(d)(2) applies, le						
If "Yes," the foundation does no	ne section 4942 tax on the distrib ot qualify under section 4940(e).	Do not com	plete this part	· · · · · · · · · · · · · · · · · · ·		
	ount in each column for each yea	r, see the ir	nstructions before	making a	ny entries	S
(a)	(b)		(c)		DA.	(d)
Base period years Calendar year (or tax year beginning in	Adjusted qualifying distributions	Net value of	of nonchantable-use as	ssets		ibution ratio
2010	12,10	06	4	.925	(001 (0) 01	2 458071
2009	16,01			,940		4.063452
2008	12,43			344		2 326722
2007				1		0 000000
2006						0 000000
2 Total of line 1, column (d)				2		8 848245
3 Average distribution ratio for	or the 5-year base period—divide undation has been in existence if					2 949415
·					 	
4 Enter the net value of nonc	hantable-use assets for 2011 fro	m Part X, III	ne 5	. 4	 	0
5 Multiply line 4 by line 3 .				5	 	0
6 Enter 1% of net investment	income (1% of Part I, line 27b)			6_	 	0
7 Add lines 5 and 6 .				7		0
8 Enter qualifying distribution				8		0
If line 8 is equal to or greate the Part VI instructions.	er than line 7, check the box in P	art VI, line 1	ib, and complete	that part u	ising a 1%	6 tax rate See

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

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing

complete Part XIV

their names and addresses

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,"

8b

9

. N/A

	m 990-PF (2011) IMPACT INTERNATIONAL,				35-211	6040	F	age 6
Pa	art VII-B Statements Regarding Activit	es for Which Forn	1 4720 May Be R	equired (continued)				
5a	During the year did the foundation pay or incur an	y amount to						
	(1) Carry on propaganda, or otherwise attempt	to influence legislation (section 4945(e))?	Yes	X No		·	ŀ
	(2) Influence the outcome of any specific public	election (see section 4	955), or to carry				ļ	-
	on, directly or indirectly, any voter registration	n drive?		Yes	X No		7.1	
	(3) Provide a grant to an individual for travel, sti	udv. or other similar pur	poses?	Yes	X No			١.
	(4) Provide a grant to an organization other than	•					1	•
	in section 509(a)(1), (2), or (3), or section 49			Yes	X No	- ا		
	(5) Provide for any purpose other than religious		•			١.	-	
	educational purposes, or for the prevention		•	Yes	X No		١	
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in								
-	Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?						NI/A	
	Organizations relying on a current notice regarding		· · · · · · · · · · · · · · · · · · ·	ліз) [,]		_5b	N/A	
_	If the answer is "Yes" to question 5a(4), does the	-						
·	tax because it maintained expenditure responsibility	·	uon nom me	□ v	□	1	- :	
	If "Yes," attach the statement required by Regulati		· (d)	· · L_ Yes	No	1		
6-								
оa	Did the foundation, during the year, receive any fu premiums on a personal benefit contract?	nas, airectly or inairectly	y, to pay	[
	,			Yes	X No			
D	Did the foundation, during the year, pay premiums If "Yes" to 6b, file Form 8870	, directly or indirectly, o	n a personal benefit (contract?		6b		Х
- -	·							
	At any time during the tax year, was the foundation				X No			
	If "Yes," did the foundation receive any proceeds of					7b		Х
Р	art VIII Information About Officers	, Directors, Truste	es, Foundation	Managers, Highly F	Paid Em	ploy	ees,	
	and Contractors							
	List all officers, directors, trustees, found	ation managers and	I their compensat	ion (see instructions).			
		(A.) T. (1)	() 0					
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (if not paid, enter	(d) Contributions to employee benefit plans	(e)	Expens	e acco	unt,
	(a) Name and address	hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensatio	1 ' '		e accor	
	VE WALORSKI	hours per week	(If not paid, enter	employee benefit plans	1 ' '			
548	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561	hours per week devoted to position PRES and BOD 4.00	(If not paid, enter	employee benefit plans	1 ' '			
548 JAN	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN	hours per week devoted to position PRES and BOD 4.00 VP and BOD	(if not paid, enter -0-)	employee benefit plans	in O			s
548 JAN 308	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00	(if not paid, enter -0-)	employee benefit plans	in O			s
548 JAN 308 KEI	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD	(If not paid, enter -0-) O	employee benefit plans	0			s 0
548 JAN 308 KEI 304	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER IN WASHINGTON BOURBON IN 46504	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00	(If not paid, enter -0-) 0	employee benefit plans	0			s 0
548 JAN 308 KEI 304 PA	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER IN WASHINGTON BOURBON IN 46504 T MASTAGH	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS	(If not paid, enter -0-) O	employee benefit plans	0			0 0
548 JAN 308 KEI 304 PA	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER IN WASHINGTON BOURBON IN 46504 T MASTAGH D NFP 59555 C R 3 ELKHART IN 46517	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00	(If not paid, enter -0-) 0 0	employee benefit plans and deferred compensatio	0 0 0	ther all		0 0
548 JAN 308 KEI 304 PA	VE WALORSKI B78 SUNSET CT OSCEOLA IN 46561 MES TIPPIN B80 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER N WASHINGTON BOURBON IN 46504 T MASTAGH O NFP 59555 C R 3 ELKHART IN 46517 Compensation of five highest-paid employ	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00	(If not paid, enter -0-) 0 0	employee benefit plans and deferred compensatio	0 0 0	ther all		0 0
548 JAN 308 KEI 304 PA	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER IN WASHINGTON BOURBON IN 46504 T MASTAGH D NFP 59555 C R 3 ELKHART IN 46517	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00	(If not paid, enter -0-) 0 0	employee benefit plans and deferred compensation	0 0 0 0 0 ss). If no	ther all		0 0
548 JAN 308 KEI 304 PA C/C	VE WALORSKI B78 SUNSET CT OSCEOLA IN 46561 MES TIPPIN B80 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER N WASHINGTON BOURBON IN 46504 T MASTAGH O NFP 59555 C R 3 ELKHART IN 46517 Compensation of five highest-paid employenter "NONE."	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00 yees (other than the	(If not paid, enter 0-) 0 0 0 see included on linge	employee benefit plans and deferred compensation ne 1—see instruction (d) Contributions to employee benefit	0 0 0 0 s). If no	ne,	owance	0 0 0
548 JAN 308 KEI 304 PA C/C	VE WALORSKI B78 SUNSET CT OSCEOLA IN 46561 MES TIPPIN B80 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER N WASHINGTON BOURBON IN 46504 T MASTAGH O NFP 59555 C R 3 ELKHART IN 46517 Compensation of five highest-paid employ	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00 yees (other than the lower of the lower per week	(If not paid, enter -0-) 0 0 0 see included on linge (c) Compensation	employee benefit plans and deferred compensation ne 1—see instruction (d) Contributions to employee benefit	0 0 0 0 ss). If not	ne,		0 0 0
548 JAN 308 KEI 304 PA C/C 2	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER N WASHINGTON BOURBON IN 46504 T MASTAGH O NFP 59555 C R 3 ELKHART IN 46517 Compensation of five highest-paid employenter "NONE."	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00 yees (other than the	(If not paid, enter -0-) 0 0 0 see included on linge (c) Compensation	employee benefit plans and deferred compensation ne 1—see instruction (d) Contributions to employee benefit	0 0 0 0 ss). If not	ne,	e accou	0 0 0
548 JAN 308 KEI 304 PA C/C	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER N WASHINGTON BOURBON IN 46504 T MASTAGH O NFP 59555 C R 3 ELKHART IN 46517 Compensation of five highest-paid employenter "NONE."	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00 yees (other than the lower of the lower per week	(If not paid, enter -0-) 0 0 0 see included on linge (c) Compensation	me 1—see instruction (d) Contributions to employee benefit plans and deferred	0 0 0 0 ss). If not	ne,	e accou	0 0 0
548 JAN 308 KEI 304 PA C/C 2	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER N WASHINGTON BOURBON IN 46504 T MASTAGH O NFP 59555 C R 3 ELKHART IN 46517 Compensation of five highest-paid employenter "NONE."	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00 yees (other than the lower of the lower per week	(If not paid, enter -0-) 0 0 0 see included on linge (c) Compensation	me 1—see instruction (d) Contributions to employee benefit plans and deferred	0 0 0 0 ss). If not	ne,	e accou	0 0 0
548 JAN 308 KEI 304 PA C/C 2	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER N WASHINGTON BOURBON IN 46504 T MASTAGH O NFP 59555 C R 3 ELKHART IN 46517 Compensation of five highest-paid employenter "NONE."	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00 yees (other than the lower of the lower per week	(If not paid, enter -0-) 0 0 0 see included on linge (c) Compensation	me 1—see instruction (d) Contributions to employee benefit plans and deferred	0 0 0 0 ss). If not	ne,	e accou	0 0 0
548 JAN 308 KEI 304 PA C/C 2	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER N WASHINGTON BOURBON IN 46504 T MASTAGH O NFP 59555 C R 3 ELKHART IN 46517 Compensation of five highest-paid employenter "NONE."	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00 yees (other than the	(If not paid, enter -0-) 0 0 0 see included on linge (c) Compensation	me 1—see instruction (d) Contributions to employee benefit plans and deferred	0 0 0 0 ss). If not	ne,	e accou	0 0 0
548 JAN 308 KEI 304 PA C/C 2	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER N WASHINGTON BOURBON IN 46504 T MASTAGH O NFP 59555 C R 3 ELKHART IN 46517 Compensation of five highest-paid employenter "NONE."	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00 yees (other than the	(If not paid, enter -0-) 0 0 0 see included on linge (c) Compensation	me 1—see instruction (d) Contributions to employee benefit plans and deferred	0 0 0 0 ss). If not	ne,	e accou	0 0 0
548 JAN 308 KEI 304 PA C/C 2	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER N WASHINGTON BOURBON IN 46504 T MASTAGH O NFP 59555 C R 3 ELKHART IN 46517 Compensation of five highest-paid employenter "NONE."	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00 yees (other than the	(If not paid, enter -0-) 0 0 0 see included on linge (c) Compensation	me 1—see instruction (d) Contributions to employee benefit plans and deferred	0 0 0 0 ss). If not	ne,	e accou	0 0 0
548 JAN 308 KEI 304 PA C/C 2	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER N WASHINGTON BOURBON IN 46504 T MASTAGH O NFP 59555 C R 3 ELKHART IN 46517 Compensation of five highest-paid employenter "NONE."	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00 yees (other than the	(If not paid, enter -0-) 0 0 0 see included on linge (c) Compensation	me 1—see instruction (d) Contributions to employee benefit plans and deferred	0 0 0 0 ss). If not	ne,	e accou	0 0 0
548 JAN 308 KEI 304 PA C/C 2	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER N WASHINGTON BOURBON IN 46504 T MASTAGH O NFP 59555 C R 3 ELKHART IN 46517 Compensation of five highest-paid employenter "NONE."	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00 yees (other than the	(If not paid, enter -0-) 0 0 0 see included on linge (c) Compensation	me 1—see instruction (d) Contributions to employee benefit plans and deferred	0 0 0 0 ss). If not	ne,	e accou	0 0 0
548 JAN 308 KEI 304 PA C/C 2	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER N WASHINGTON BOURBON IN 46504 T MASTAGH O NFP 59555 C R 3 ELKHART IN 46517 Compensation of five highest-paid employenter "NONE."	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00 yees (other than the	(If not paid, enter -0-) 0 0 0 see included on linge (c) Compensation	me 1—see instruction (d) Contributions to employee benefit plans and deferred	0 0 0 0 ss). If not	ne,	e accou	0 0 0
548 JAN 308 KEI 304 PA C/C 2	VE WALORSKI 378 SUNSET CT OSCEOLA IN 46561 MES TIPPIN 380 EDWARDS TRAIL DOWAGIAC MI 4904 N MILLER N WASHINGTON BOURBON IN 46504 T MASTAGH O NFP 59555 C R 3 ELKHART IN 46517 Compensation of five highest-paid employenter "NONE."	hours per week devoted to position PRES and BOD 4.00 VP and BOD 4 00 SEC and BOD 4 00 TREAS 6.00 yees (other than the devoted to position (b) Title, and averal hours per week devoted to position	(If not paid, enter -0-) 0 0 0 see included on linge (c) Compensation	me 1—see instruction (d) Contributions to employee benefit plans and deferred compensation	0 0 0 0 ss). If not	ne,	e accou	0 0 0

Form 990-PF (2011) IMPACT INTERNATIONAL, INC.	35-2116040 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Manag	ers, Highly Paid Employees,
and Contractors (continued)	
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 se	ervice (c) Compensation
NONE	
	0
	0
	0
	_
	0
Total number of others receiving over \$50,000 for professional services	0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable 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 The organization continued to distribute educational information, provide religious instruction;	and to
support missionaries promoting poor relief and orphanage(s).	
	9,419
2	
3	
4	
Port IV D. Cummon, of Program Polated Investments (see instructions)	
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	A
1	Amount
'	
2	
•	
All other program-related investments. See instructions	
3	
	0
Total. Add lines 1 through 3	. ▶ 0

Form 990-PF (2011)	IMPACT INTERNATIONAL	INC
01111 000 1 1 (***(***)		

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Par	Minimum Investment Return (All domestic foundations must complete this part. Foreign for see instructions)	unda	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	$\neg \top$	
	purposes		
а	Average monthly fair market value of securities	1a	4,000
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	4,000
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	4,000
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	60
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	3,940
6	Minimum investment return. Enter 5% of line 5	6	197
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here L and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	197
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	197
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	197
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		•
	line 1	7	197
Par	XII Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		1a	9,419
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.	İ	
	purposes	2	
3	Amounts set aside for specific chantable projects that satisfy the		
а	Suitability test (prior IRS approval required)	<u>3a</u>	
b		3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	9,419
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	9,419
	Alete. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the founds	tion	

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

Par	XIII Undistributed Incom	ne (see instructions)				
	D	0.47	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d)
1	Distributable amount for 2011 fro	om Part XI,	Colpus	rears pilor to 2010	2010	2011
2	Undistributed income, if any, as	of the end of 2011				197
2 a	Enter amount for 2010 only	of the end of 2011			0	
b		20 20		0		
3	Excess distributions carryover, if					<u> </u>
а	From 2006	21,135			•	
ь Ь	From 2007	38,150	ı	<u>-</u>		
C	From 2008	12,167			•	•
d	From 2009	15,813				, '
e	From 2010	11,860			<u>.</u>	
f	Total of lines 3a through e		99,125			S" - 1
4	Qualifying distributions for 2011	from Part				
	XII, line 4 ► \$	9,419		,		* * *:
а	Applied to 2010, but not more th	an line 2a			O.	
b	Applied to undistributed income	of prior years			· 15	
	(Election required—see instruction	ons)		0	•	
C	Treated as distributions out of co	orpus (Election				,
	required—see instructions)	1	0		· · · · · · · · · · · · · · · · · · ·	
d	Applied to 2011 distributable am	ount				197
е	Remaining amount distributed or	ut of corpus	9,222			
5	Excess distributions carryover ap	pplied to 2011	0			0
	(If an amount appears in column					
_	same amount must be shown in	:			- :	· , -
6	Enter the net total of each colu	ımn as			. و	
	indicated below:	0.54.5.54.1 5	400 247		·	
a	Corpus Add lines 3f, 4c, and 4e		108,347			
0	Prior years' undistributed income	Subtract		o	-	
	line 4b from line 2b Enter the amount of prior years'	undistributed				
C	income for which a notice of defi	1]		•	a
	been issued, or on which the sec	•				
	tax has been previously assesse	· · · · · · · · · · · · · · · · · · ·				A 77 5
4	Subtract line 6c from line 6b Tax	f		-		
	amount—see instructions			ol		_
е		Subtract line				
	4a from line 2a Taxable amount	Į.				
	instructions				0	
f	Undistributed income for 2011 S	Subtract				
	lines 4d and 5 from line 1. This a	mount must	I	i		
	be distributed in 2012	<u> </u>				0
7	Amounts treated as distributions	out of				
	corpus to satisfy requirements in	nposed by	1		`	
	section 170(b)(1)(F) or 4942(g)(3	3) (see instructions)				
8	Excess distributions carryover from			İ		-2. P
	not applied on line 5 or line 7 (se		21,135			/ · · · · · · · · · · · · · · · · · · ·
9	Excess distributions carryover		[[712
	Subtract lines 7 and 8 from line 6	6a .	87,212			
10	Analysis of line 9		İ			
а	Excess from 2007	38,150	ļ	-	_	
b	Excess from 2008	12,167	}	l		
C	Excess from 2009	15,813		ļ		
d	Excess from 2010 .	11,860		ł	۔ آج کے	
е	Excess from 2011	9,222				

Forr	n 990-PF (201,1) IMPACT INTERNATIONAL,	INC			35-2116	6040 Page 10
	rt XIV Private Operating Foundations (uestion 9)		
1 a	If the foundation has received a ruling or determin foundation, and the ruling is effective for 2011, en			•		
	Check box to indicate whether the foundation is a	private operating fou	ndation described ii	n section	4942(J)(3) or	4942(J)(5)
2 a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
	investment return from Part X for each	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
	year listed	0	0	0	0	0
b	85% of line 2a	0	0	0	0	0
C	Qualifying distributions from Part XII, line 4 for each year listed	9,419	12,106	16,010	12,434	49,969
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0
	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	9,419	12,106	16,010	12,434	49,969
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test—enter					
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	131	164	131	178	604
С	"Support" alternative testenter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0
Pa	rt XV Supplementary Information (Co	mplete this part	only if the four	ndation had \$5,	000 or more in	
	assets at any time during the ye		tions.)	 		
	Information Regarding Foundation Manag List any managers of the foundation who have col before the close of any tax year (but only if they have	ntributed more than 2			the foundation	
NO	NE List any managers of the foundation who own 10%	6 or more of the stock	of a compration (o	r an equally large no	ortion of the	
	ownership of a partnership or other entity) of which					
NO	NE					
2	Information Regarding Contribution, Gran	nt, Gift, Loan, Sch	olarship, etc., Pı	rograms:		
	Check here					
a	The name, address, and telephone number of the	person to whom app	lications should be	addressed.		
b	The form in which applications should be submitted	ed and information an	d materials they sho	ould include		
	Any submission deadlines					
d	Any restrictions or limitations on awards, such as factors	by geographical area	s, chantable fields,	kinds of institutions,	or other	

Total

IMPACT INTERNATIONAL, INC 35-2116040 Page **11** Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year Chanty Casa Shalom Romanian Charity 5,500 Charity Romania ➤ 3a 5,500 Approved for future payment

3b

Part XVI. Analysis of Income-Producing Activities	Form 990-PF	(2011) IMPACT INTERNATIONAL, INC				35-211	6040 Page 12	
Program service revenue	Part XVI-	A Analysis of Income-Producing Acti	vities					
I Pringram service revenue Summers code	Enter gros	s amounts unless otherwise indicated.	Unrelated bus	iness income	Excluded by section	Excluded by section 512, 513, or 514		
D	4 Program	m cenuca ravenua					Related or exempt function income	
b 0 0 0 0 0 0 0 0 0	_			0		0		
C O O O O O O O O O								
d				0			<u>-</u>	
g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and repropry cash investments 4 Devidends and interest from securities 5 Net rental income or (toss) from real estate a Debt-financed property 5 Not debt-financed property 6 Net rental income or (toss) from personal property 7 Other investment income 8 Gain or (toss) from spacial events 9 Net income or (toss) from spacial events 10 Gross profit of (toss) from sales of assets other than inventory 9 Net income or (toss) from sales of inventory 11 Other revenue a 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				0		0		
g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 Net rental income or (6xs) from feel estate a Debt-financed property b Not debt-financed property 7 Other investiment income 8 Gain or (6xs) from seles of assets other than inventory 9 Net income or (6xs) from special events 10 Gross profit or (6xs) from special events 11 Other evenue a 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				0		0		
2. Numbership dues and assessments 3. Interest on sawings and temporary cash investments 4. Develoreds and interest from securities 5. Net rental income or (loss) from sele estate a. Debt-financed property b. Not debt-financed property 7. Other investment income 8. Gain or (loss) from sales of assets other than inventory 9. Net income or (loss) from sales of inventory 11. Other revenue a. Develored in common forms and the common forms are common forms and the common forms and the common forms are common forms and the common forms are common forms and the common forms are common forms and the common forms are common forms and the common forms and the common forms are common forms. 2. Los descriptions and the common forms are common forms and the common forms are common forms. The common forms are common forms are common forms are common forms are common forms. The common forms are common forms are common forms are common forms and common forms are common forms are common forms. The common forms are common forms are common forms are common forms are common forms are common forms are common forms. The common forms are	f			0		0		
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5 Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from sales of assets other than inventory 11 Other revenue a 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	3 Interest	t on savings and temporary cash investments						
a Debt-financed property b Not debt-financed property c Not debt-financed property f Other investment income c (loss) from personal property 7 Other investment income c (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 1 Other revenue a 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 15 Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)	4 Dividen	ds and interest from securities						
b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from sales of assets other than inventory 11 Other revenue a	5 Net ren	tal income or (loss) from real estate						
6 Net rental income or (loss) from personal property 7 Other investment income 8 Gan or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								
7 Other investment income 8 dain or (loss) from sales of assets other than inventory 9 Net income or (loss) from sales of inventory 10 Gross profit or (loss) from sales of inventory 11 Other revenue a	b Not	debt-financed property		·			. .	
8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a	6 Net ren	tal income or (loss) from personal property						
9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 1 Other revenue a	7 Other in	nvestment income		· 				
10 Gross profit or (loss) from sales of inventory 11 Other revenue a 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)				,		0		
11 Other revenue a		•			- 11 - 11 - 11			
b			<u> </u>					
c d d 0 0 0 0 0 0 0 0 0 0 12 Subtotal Add columns (b), (d), and (e) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	_				 			
d								
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)					· · · · · · · · · · · · · · · · · · ·			
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)								
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)		al Add columns (b) (d) and (e)						
(See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions) Cartesian See in the Accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)				<u></u>	<u> </u>			
Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)							<u></u>	
Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)	Part XVI-	B Relationship of Activities to the Ac	complishment	of Exempt P	urposes			
the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)						nportantly to	· · · · · · · · · · · · · · · · · · ·	
Form 990-PF (2011)		the accomplishment of the foundation's exempt	purposes (other tha	in by providing fu	nds for such purpo	oses) (See instru	ctions)	
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Form 990-PF (2011)	\longrightarrow							
						For	n 990-PF (2011)	

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described								cribed		Yes	No			
			501(c) of the Code	e (other than	section 501(c)(3) organız	ations) oi	r ın sec	tion 527, relatin	g to p	olitical			
	orga	anizat	ions?											ĺ
а	Trai	nsfers	from the reporting	foundation to	a noncharitabl	le exempt	organiza	tion of						ĺ
	(1)	Cash										1a(1)		Х
	(2)	Other	rassets .									1a(2)		X
b	Oth	er trar	nsactions.											
	(1)	Sales	of assets to a non	ncharitable ex	empt organizati	ion						15(1)		Х
	(2)	Purch	nases of assets froi	m a noncharit	table exempt or	ganızatıor	1					1b(2)		X
	(3)	Renta	al of facilities, equip	pment, or othe	er assets .							1b(3)		X
	(4)	Reim	bursement arrange	ements .					•			1b(4)		Χ
	(5)	Loans	s or loan guarantee	es								1b(5)		Х
	• •		rmance of services		•	•						1b(6)		X
		-	of facilities, equipme	_		•					•	_1c_		X
d	If th	e ans	wer to any of the al	bove is "Yes,	" complete the f	following s	schedule.	Colum	n (b) should alv	vays s	show the fa	ıır mark	et	
	valu	e of the	he goods, other as:	sets, or service	ces given by the	e reporting	foundati	on If th	e foundation re	ceive	d less than	n fair ma	arket _.	
	valu	e in a	ny transaction or s	nanng arrang	gement, snow in	i column (a) the val	iue of tr	ne goods, other	asse	ts, or servi	ces rec	eived	
(a) t	ine n	0	(b) Amount involved	(c) Name	of nonchantable exe	empt organiz	ation	(d) Des	scription of transfers	, transa	ctions, and st	anng arra	angeme	ents
			0						_					
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		_	0											
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2a	Is th	e fou	ndation directly or i	indirectly affili	ated with, or re	lated to, o	ne or mo	re tax-e	xempt organiza	ations				
			I in section 501(c) of									es 🗍	No	
			complete the following			, , ,						- Land		
		((a) Name of organization	 	(b) T	Type of organ	ization		(c)	Descri	ption of relation	nship		
					I			i						
			penalties of perjury, I declare t							iledge an	d belief, it is true	,		
Sig	ın	correct	, and complete Declaration of	preparer (other than	taxpayer) is based on al	intormation of	wnich preparer	r nas any kr	owieage		May the IRS d	scuss the	s returr	\Box
_	- 1		11/1/1/1/1		///	12	01-	حران			with the prepa			- 4
Here Id Walow 5/6/12 PLCS/DENT with the prepare instructions)?							X Ye	s 🔲	No					
		Sigi	nature of officer or truster		Date		Title	·r		,				
Pai	d		Print/Type preparer's na	ame	Preparer's signatu	re sp.			Date	\ \c-	_α , □ .,	PTIN		
			JAMES O'BRIEN		Chance 1	7(1)	می ر	Ì	3/10/2012	Che	_	D01204	2426	
	pa			BRIEN TELLO	DYAN	10000	1-7-		3/10/2012	Firm's		P01206		—
Us	e O	nly			,	N ASSOCI	2440					1-18633		—
Firm's address PO BOX 449 SOUTH BEND, IN 46624-0449						Phone	= IIO (5/4)287-76	วลก					

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

Name of the organization		Employer Identification number
IMPACT INTERNATIONAL,	INC.	35-2116040
Organization type (check of	ne)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion
	501(c)(3) taxable private foundation	
•	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule ar	nd a Special Rule See
General Rule		
property) from any o	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II DED MORE THAN \$5,000 IN 2011	or more (in money or
sections 509(a)(1) a	(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support t nd 170(b)(1)(A)(vi) and received from any one contributor, during the yea 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, li	r, a contribution of the greater
the year, total contri	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from butions of more than \$1,000 for use exclusively for religious, charitable, ses, or the prevention of cruelty to children or animals. Complete Parts I, II,	scientific, literary, or
the year, contribution total to more than \$1 year for an exclusive applies to this organized.	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from ns for use <i>exclusively</i> for religious, charitable, etc., purposes, but these cliquous of this box is checked, enter here the total contributions that were religious, charitable, etc., purpose. Do not complete any of the parts unization because it received nonexclusively religious, charitable, etc., continuous contributions.	ontributions did not eceived during the nless the General Rule nless of \$5,000 or more
990-EZ, or 990-PF), but it m	at is not covered by the General Rule and/or the Special Rules does not fi ust answer "No" on Part IV, line 2, of its Form 990; or check the box on line- PF, to certify that it does not meet the filing requirements of Schedule B	ne H of its Form 990-EZ or on

Name of organization Employer identification number IMPACT INTERNATIONAL, INC 35-2116040 Contributors (see instructions) Use duplicate copies of Part I if additional space is needed Part I (b) (c) (a) (d) Name, address, and ZIP + 4 **Total contributions** No. Type of contribution NONE Person __1__ **Payroll** Noncash Foreign State or Province (Complete Part II if there is Foreign Country a noncash contribution.) (a) (c) (d) Name, address, and ZIP + 4 **Total contributions** No. Type of contribution 2 Person **Payroll** Noncash Foreign State or Province (Complete Part II if there is Foreign Country a noncash contribution) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person 3 **Payroli** Noncash Foreign State or Province (Complete Part II if there is Foreign Country a noncash contribution) (b) (d) (c) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person 4 **Payroll** Noncash Foreign State or Province (Complete Part II if there is a noncash contribution) Foreign Country (b) (c) (d) (a) **Total contributions** Name, address, and ZIP + 4 Type of contribution No. Person . . 5 **Payroll** Noncash Foreign State or Province (Complete Part II if there is a noncash contribution) (c) (b) (d) (a) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person 6 **Payroll** Noncash Foreign State or Province (Complete Part II if there is Foreign Country a noncash contribution)

Name of organization Employer identification number IMPACT INTERNATIONAL, INC 35-2116040

Part II	Noncash Property (see instructions). Use duplicate co	ppies of Part II if additional spa	ce is needed
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	NONE	\$0	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$0	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ <u>o</u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ <u>o</u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$0	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$0	

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Name of org	_				Employer identification number
	TERNATIONAL, INC	in all cide at	-4-164144	2044	35-2116040
Part III	Exclusively religious, charitable, etc.,				
	total more than \$1,000 for the year. Co				• ,
	For organizations completing Part III, entrocontributions of \$1,000 or less for the year.				
	Use duplicate copies of Part III if addition			Sirucii	ions.) > \$0
(a) No.	Ose duplicate copies of Fart III if addition	al space is field	eueu	ι –	
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I		· · · · · · · · · · · · · · · · · · ·		<u> </u>	·
		(a) T	ransfer of gift	·	
		(0)	ransici oi giit		
	Transferee's name, address, and	ZIP + 4	Relationsh	nip of t	transferor to transferee
	For Prov Country				
(a) No. from	(b) Purpose of gift	10) Use of gift	(4	\ Description of how sift is held
Part I	(b) Fulpose of gift	(0	, use or gift	, α) Description of how gift is held
		(e) T	ransfer of gift	L	
		(6)	ransier or gift		
	Transferee's name, address, and	ZIP + 4	Relationsh	ip of	transferor to transferee
		· · · · · · · · · · · · · · · · · · ·			
	For Prov Country				
(a) No. from	(b) Purpose of gift	(6)) Use of gift	(4) Description of how gift is held
Part I	(b) r dipose of gift	(0)		,,	
					••••••
		(a) T	ransfer of gift	L	
		(e) i	ransier or gift		
	Transferee's name, address, and	ZIP + 4	Relationsh	ip of 1	transferor to transferee
	Transfered o frame, address, and	<u> </u>	1	р с.	
	For Prov Country				
(a) No.	(b) Purpose of gift	/2) Use of gift	,,) Description of how gift is held
from Part I	(b) Furpose or girt	(0	, use or gift	,,	, bescription of now girt is neit
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		(e) i	ransfer of gift		
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	Transferee's name, address, and	AIT T4	Relationsn	יזט קייי	transferor to transferee
	For Prov Country				

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

•									
		Check			•		Foreign		Average
	Name	If Business	Street	Š	State	Zin Code	Country	Title	Holling
1	DAVE WALORSKI		54878 SUNSET CT	OSCEOLA	Z	46561		RES and RO	3
7	JAMES TIPPIN		30880 EDWARDS TRAIL	DOWAGIAC		49040		VP and BOD	
က	KEN MILLER		304 N. WASHINGTON	BOURBON		46504		THE STATE OF	
4	PAT MASTAGH		C/O NFP 59555 C.R. 3	FIXHART	2	46517		TPEAS	9,0
5	•			; ; ;).).	
9	1			•					•
7				•		•			
8				•		•			
6						-			
10	-								

PACT INTERNATIONAL, INC

Line 23 (990-PF) - Other Expenses

		3,202	0	0	0
		Revenue and			Disbursements
		Expenses	Net Investment	Adjusted Net	for Charitable
	Description	per Books	Income	Income	Purposes
1	Credit Card Fees	107			
2	Online Data	288	:		
3	Software	- 64	!	:	
4	Donations	450	:	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	1
5	Ministry Equipment	1,553		;	1 1
1	Equipment Repair	375	:		
1	Memberships	150	:	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	
8	Bank Fees	. 40	: : : : : : : : : : : : : : : : : : : :	,	
6	Miscellaneous	175			
10		:			1 1
11				;]	:
12			;		
13	•	!			
14					: : :
15				:	
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17			1		
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