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Form 990

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

•			Under section 5		r 4947(a)(1) of the			(except bla	ck lung	450	: =
Depart	ment of th	he Treasury e Service	► The organization		enefit trust or pri		-	porting requ	irements	Open to I	
			ndar year, or tax year	-			nd endin			, 20	
			C Name of organization		NE MINISTRIES				D Employe	r identification n	umber
	Address change Doing Business As									91-1550156	
_	Name change									e number	
	nitial retui	, i	PO BOX 4002						1	714-484-0042	
$\equiv$	erminate		City or town, state or co	ountry, and ZIP	+ 4	·	<b></b>	-			
_	mended		TUSTIN, CA 92781-40	02					G Gross red	ceipts \$	1,333,050
_			F Name and address of pa					H(a) Is this		or affiliates? Ye:	
	ррисано	ar perioring						1		cluded? Ye	
		npt status	☑ 501(c)(3)	501(c) (	) ◀ (insert no )	4947(a)(1) or	527			list (see instruction	
	Vebsite.	•		<u> </u>	7 - (1100/11/10)	L 4547 (a)(1) 01		<del> </del>	p exemption	•	•
			Corporation Trust	Association	on ☐ Other ►	1 1 20	ar of format		<del>`                                    </del>	of legal domicile	WA WA
	rt i	Summ			on [] Other >	1.0	ai Oi iOiiiiai	1011 1332	. Wi State t	or legal domicile	
عيا						agat agtuutiga	DDOD	A C A TINIC T	HE COCDE	L OF IESUS O	UDICT
1			escribe the organizat								
B			SOSPEL RESTRICTED								
Activities & Governance			SIONARIES, PLANTIN				ND PRO	VIDING HUN	MANITARIA	N ASSISTANC	ES
E			SECUTED BELIEVERS								
8			his box $ ightharpoonupigsquare$ if the org				isposed (	of more tha		its net assets	
8			of voting members o	-	• • •				3	<u> </u>	6
es	4	Number	of independent votin	g members	of the governing	g body (Part Vi	, line 1b)		4		4
ž	5	Total nui	mber of individuals e	mployed in	calendar year 20	)11 (Part V, line	e 2a)		5		10
t t	6	Total nui	mber of volunteers (e	stimate if ne	ecessary)				6		30
٩	7a	Total uni	related business reve	enue from Pa	art VIII, column (	C), line 12			7a		0
ļ	b	Net unre	elated business taxab	le income fr	om Form 990-T	, line 34			7b		0
								Prior '	Year	Current \	/ear
	8	Contribu	itions and grants (Pa	rt VIII, line 1	h)		Ī		1,078,377		1,331,794
ا ق			serviće revenue (Pa				Ī				
Revenue		-	ent income (Part VIII,			'd)	Ì				-
اعت			venue (Part VIII, <mark>colu</mark>			<b>-</b> '	•		4,434		1,256
	12	Total rev	enue—add lines 8 thi	rough 1.1km	ust equal Part VII	I column (A). I	ine 12)		1,082,811		1,333,050
_			and similar amounts						603,544		595,938
	14	Ronofite	paid to or for memb	ore (PartilY)	COLUMN (A), INC.	3	Ì		- 000,0 11		- 000,000
		Colorina	other compensation,		oportion (Post IX)	hima (A) linas	. 5 10\		322,796	<del></del>	359,461
Expenses	15						3-10)		322,730		333,401
ë			onal fundraising fees				i	<del></del>		*	
S.	l		ndraising expenses (F								
w	17		kpenses (Part IX, colt			•	_, }		139,676		145,906
	18		penses Add lines 13	•	•	umn (A), line 2	5)		1,066,016	н	1,101,305
	19	Revenu	e less expenses Sub	tract line 18	from line 12				16,795		231,745
Assets or Balances								Beginning of		End of Y	
sets	20		sets (Part X, line 16)		•				484,799		773,796
d As	21		bilities (Part X, line 26		•		ļ		0		57,252
ΣŢ	22	Net ass	ets or fund balances	Subtract lin	ne 21 from line 2	0			484,799		716,544
Pá	art II	Signa	ature Block								
			jury, I declare that I have e							my knowledge ar	id belief, it is
tru	е, сопес	t, and com	plete Declaration of prepar	rer (other than o	officer) is based on al	ll information of wh	nich prepare	er has any kno	wledge		
			$\sim$						-		
Sig	n n	Sig	nature of office		1 1-				Date	11	
He	re		Pete	~	Heir	, execu	tive	Direc	tor 9	14/201	2
		Tyl	pe or print name and title								<del></del>
_	• •	Print/1	Type preparer's name		Preparer's signature		C	ate	Ob and a	PTIN	•
Pa				ļ					Check self-em		
	epare		nomo b			<u> </u>		TE		· · .	
Us	se On		name >			<del></del>	<del></del>		irm's EIN ►	<del></del>	
Ma	v the II		address ► ss this return with the	nrenarer e	hown above? (so	ee instructions	3	<u></u>	hone no		es No
	<u></u>				<del></del>			NI- 11000V			990 (2011)
FOI	rapen	work Rec	luction Act Notice, see	ะ เกе separat	e instructions.		Cat	No 11282Y		Form	. 330 (2011)

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Form	990	(2011)	

Part I		
1	Check if Schedule O contains a response to any question in this Part III  Briefly describe the organization's mission	<u> </u>
•	TO SEEK THE LOST SHEEPS OF GOD AND COMFORT THEM, MAKE DISCIPLES OF JESUS CHRIST, AND TO WORK TOGE	THER IN
	HOLY SPIRIT, TO BUILD THE KINGDOM OF GOD IN THE GOSPEL RESTRICTED NATIONS WHERE CHRISTIANS ARE BEING	
	PERSECUTED	
2	Did the organization undertake any significant program services during the year which were not listed on the	
		s ☑No
•	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	
	<u></u>	s ☑No
4	If "Yes," describe these changes on Schedule O  Describe the organization's program service accomplishments for each of its three largest program services, as me	accured by
7	expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the grants and allocations to others, the total expenses, and revenue, if any, for each program service reported	
	(Code ) (Expenses \$ 349,859 including grants of \$ 243,831 ) (Revenue \$	<del></del>
	Delivering bibles and Christian literatures to the persecuted church in the Gospel restricted nations such as North Korea,	
	China, some Islamic nations, and Israel with the combined effort of other partnering ministries, mission organizations, and	
	missionaries We are also have broadcasted one hour a day over short wave to reach believers and Christian leaders in No	orth Korea
	This year we distributed 104,815 copies of North Korean bibles and 42,930 Chinese bibles	
		**
		••
	•	
4b	(Code ) (Expenses \$ 144,399 including grants of \$ 82,453 ) (Revenue \$ Raise up leaders in the restricted nations for them to minister and to propagating the Gospel of Jesus Christ by having bible school, seminaries, and conferences along with other ministries, missionaries, and organizations. Equip potential leaders among Korean living in Korea and living around the world to enter into the restricted mission fields. Distribute new and prayer letters to inform the needs of supporting leaders and current situation of the persecuted church in the restricte 96 ministers and professors taught a total of 6,192 hours to 454 students in 8 different courses.	
	/Coda \\Evappeo \\ 159.525 \regledyddag gynta of \\ 20.219 \\/\Delegapeo \\	
4c	(Code ) (Expenses \$ 169,625 including grants of \$ 39,218 ) (Revenue \$ Facilitating and supporting other ministries and missionaries for networking and partnering in delivering and teaching	)
	the Word of God and train people to be missionaries in the restricted nations. We held two conferences in this year and ov	er 524
	participants attended We also held mission bible study school and total of 185 students were trained. In addition, we mai	
	to China for 119 people in 12 teams.	
		**
4d	Other program services (Describe in Schedule O ) (Expenses \$ 280,994 including grants of \$ 211,537 ) (Revenue \$ )	_
4e	Total program service expenses ▶ 963.777	

	Part l	V	Checklist	of R	equired	Schedul	es			
`										
	1	Is the	organizati	on de	scribed	in section	501(c)(3)	or 4	1947(a)(1)	(nth

		ŀ	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	<b>✓</b>	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		<b>√</b>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	_	<b>✓</b>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	_5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	!	1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		<b>√</b>
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			<u> </u>
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	-	1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	,		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII .	11c	1	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a		14a	✓	<del> </del>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	1	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	1	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	1	-
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a		20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

Form 99			F	2age <b>4</b>
Part	Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization	r	Yes	No
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	1	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		<b>√</b>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		<b>✓</b>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	1	1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O

Form **990** (2011)

Tomi 33				Page 3
Part	V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			. 🗆
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	[		{
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			ĺ
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 10			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			"
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1		
	account)?	4a	<u> </u>	<b>√</b>
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts		1	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	1	1	
	gifts were not tax deductible? .	6b	<u> </u>	_
7	Organizations that may receive deductible contributions under section 170(c).		]	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	}	]	
	and services provided to the payor?	7a		1
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c	<u> </u>	<b>V</b>
d	If "Yes," indicate the number of Forms 8282 filed during the year	]		-
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	<del>-</del>	1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u> </u>	<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	<u> </u>	<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	ļ	l	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			١.
_	organization, have excess business holdings at any time during the year?	8	<b>-</b>	<b>↓</b> ✓
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a	<del> </del>	<b>↓</b>
b	• • • • • • • • • • • • • • • • • • • •	9b	—	<del> </del> -
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12	-		
11	Section 501(c)(12) organizations. Enter	-		}
'' a	Gross income from members or shareholders		1	ŀ
b		┨		
-	against amounts due or received from them)	1		Ì
12a	<u> </u>	12a	1	
b		120	┼──	<del>  -</del>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		-
a		13a	+	<del>                                     </del>
_	Note. See the instructions for additional information the organization must report on Schedule O	.03	+-	+
b	Enter the amount of reserves the organization is required to maintain by the states in which	1	1	1
	the organization is licensed to issue qualified health plans			
С		1		
14a		14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in									
Section	Check if Schedule O contains a response to any question in this Part VI on A. Governing Body and Management	· ·	<u>·</u>		<u>()</u>					
0000	on A. Governing Body and Mainagement			Yes	No					
1a	a Enter the number of voting members of the governing body at the end of the tax year  If there are material differences in voting rights among members of the governing body, or  If the governing body delegated broad authority to an executive committee or similar  committee, explain in Schedule O  b Enter the number of voting members included in line 1a, above, who are independent  1b									
b 2	Enter the number of voting members included in line 1a, above, who are independent  Did any officer, director, trustee, or key employee have a family relationship or a business relation any other officer, director, trustee, or key employee?	ationship with	2	<i>-</i>						
3	Did the organization delegate control over management duties customarily performed by or unsupervision of officers, directors, or trustees, or key employees to a management company or other particles.		3		<b>✓</b>					
4 5 6 7a	<ul> <li>Did the organization become aware during the year of a significant diversion of the organization's assets?</li> <li>Did the organization have members or stockholders?</li> <li>Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?</li> </ul>									
þ										
8	Did the organization contemporaneously document the meetings held or written actions under the year by the following	ertaken during								
a	The governing body?		8a 8b	1	<u> </u>					
9	Each committee with authority to act on behalf of the governing body?  Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at									
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	<u> </u>	9		✓					
Secti	on B. Policies (This Section B requests information about policies not required by the	Internal Reven	ue C		1					
10a	Did the organization have local chapters, branches, or affiliates?		10a	Yes	No ✓					
b	If "Yes," did the organization have written policies and procedures governing the activities of s affiliates, and branches to ensure their operations are consistent with the organization's exempt		10b		-					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		11a	1						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990									
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give required to disclose annually interests.		12a 12b	1						
С	Did the organization regularly and consistently monitor and enforce compliance with the po describe in Schedule O how this was done	licy? If "Yes,"	12c	1						
13	Did the organization have a written whistleblower policy?	•	13	1	<u> </u>					
14 15	Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review an independent persons, comparability data, and contemporaneous substantiation of the deliberation a		14	<u>√</u>						
а	The organization's CEO, Executive Director, or top management official		15a		1					
b	Other officers or key employees of the organization .	•	15b		1					
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar with a taxable entity during the year?	r arrangement	16a		1					
b	participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?		16b							
	ion C. Disclosure									
17 18	List the states with which a copy of this Form 990 is required to be filed ► CALIFORNIA  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and available for public inspection. Indicate how you made these available. Check all that apply  Own website ☐ Another's website. ☑ Upon request	d 990-T (Section	า 501(	c)(3)s	only)					
19	Describe in Schedule O whether (and if so, how), the organization made its governing document financial statements available to the public during the tax year	nents, conflict o	of inte	rest p	oolicy,					
20	State the name, physical address, and telephone number of the person who possesses the body		of the	•						

orm	990	<i>(2</i> 01	1)

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

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

17

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor	any related	d orga	anız	atıo	n co	ompe	nsa	ted any curren	t officer, director	r, or trustee
	(C)									
(A)	(B)			Pos				(D)	(E)	(F)
Name and Title	Average					than o		Reportable	Reportable	Estimated
	hours per	irs per officer and a director/trustee)						compensation	compensation from	
	week (describe	or Or	<u>a</u> <u>a</u>		Ž.	eg II	Fo	from the	related organizations	other compensation
	hours for	dire	it d	Officer	y e	nple:	Former	organization	(W-2/1099-MISC)	from the
	related organizations	lual	tion.	_	npk	st co	٦	(W-2/1099-MISC)		organization and related
	in Schedule	Individual trustee or director	1 4		Key employee	ğ	l			organizations
	O)	tee	Institutional trustee		"	Highest compensated employee				
			0			l ē				
								-		
(1) Isaac Lee				İ			Į			
2660 W Woodland Dr #105, Anaheim, CA	60			✓				45,600	0	
(2) Peter Lee										
2660 W Woodland Dr. #105, Anaheim, CA	60			✓				45,600	0	0
(3) Duk Young Chun		ļ					l			
2 Main St Hopkins, MA	0	✓_						0	0	
(4) Yong In Song	}							-		
2660 W Woodland Dr. #105, Anaheim, CA	0	1		L.	_		_	0	0	
(5) Seounghee Koh	1									
1717 Otterbeing Ave , Rowland Height, CA	0	_	ļ	<u>_</u>	_			0	0	
(6) Cho-In Kim				1	1	1	1			ĺ
4395 Deopar Dr , Yorba Linda, CA	0	/	╙	<u> </u>	_			0	0	
					ļ	ļ		1	l	
		├	├_	<u> </u>	<u> </u>	<u> </u>	_			<del></del>
(8)	-									
	<del> </del>		-	-	<b>├</b>	-	<del> </del>		<b></b>	
(9)										
(10)	<del></del>		-	┢	<b>-</b>	-	-		<u> </u>	
(10)	1			]						
(44)	<del> </del> -	<del>                                     </del>	$\vdash$	├	╆	<del> </del>	╁		<del> </del>	<del></del>
(11)	4	}	1			ļ			ļ	
(12)	-	<del>                                     </del>	$\vdash$		$\vdash$	<del> </del>	$\vdash$	<del> </del>	<del> </del>	<del> </del>
1127		1	1		1					
(13)	<del>                                     </del>	<del>                                     </del>	十		<del> </del>	$\vdash$	$\dagger$			<del> </del>
<u> </u>	1				1					
(14)		<b> </b>		t	T	<u> </u>	T	†		<del></del>
(1-7)	1		1							

Part	(B) Average hours per	(do no box, t	ot ch unles	Pos eck s pe	C) ition more rson	than on the structure of the structure o	one n an	(D) Reportable compensation	(E) Reportable compensation from		(F) Estimate om amount			
	,		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatioi (W-2/1099-M		compo from organ and	ther ensation m the nization related nizations	
(15)			_											
(16)			<del> </del>		-									
(17)						-					+			-
(18)			_		-			<del> </del>						
(19)				<del> </del>		-		-						
(20)				-		<u> </u>	-	$\vdash$				<del>_</del>		
(21)			-			-	-	-			-			
(22)				-		-		-			-			
(23)					-	+-	-	-						
(24)			-	-		-		$\vdash$	ļ	-			—–	
(25)			-		H	-	<u> </u>	_						
1b	Sub-total	1	<u>L</u>	<u>.                                    </u>		<u> </u>			91,200		0			0
С	Total from continuation sheets to Part	VII, Section	on A					<b>•</b>						
d_	Total (add lines 1b and 1c)  Total number of individuals (including bu	t not limite			- Lic	tod	abov	<u> </u>	91,200	<del></del>	0 000			0
	reportable compensation from the organ		J 10 11		- 113		abov	——	viio received ii			J UI		
3	Did the organization list any former or							emj	ployee, or high	nest compe	nsate	d [	Yes	No
4	employee on line 1a? If "Yes," complete											3	₩	1
-	For any individual listed on line 1a, is the organization and related organizations													
_	individual											4	<b>↓</b>	1
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or inc	iividua	5		1
Section	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Re year													ax 
	(A) Name and business ad	dress							(B) Description of	services		(C) Compen		
								L						
					_			+-	<del></del>					
	Total number of independent contract	ors (includi	ing b	ut r	not	lım	ited t	 o t	hose listed at	oove) who				
	received more than \$100,000 of comper	•	_						0	,	<u></u>			

Part	VIII .	Statement of Revenue						
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	1b					,
s, C	C	Fundraising events	1c				}	·
Sift lar	d	×	1d					
ıs,	е	, ,	1e		Į.		<u>.</u>	
tior er S	f	All other contributions, gifts, grants,						
di the		and similar amounts not included above	1f	1,331,794				
d of	g	Noncash contributions included in lines 1a-1	1f \$ _					-
	h	Total. Add lines 1a-1f		<b>&gt;</b>	1,331,794			
Program Service Revenue			L	Business Code				1
ver	2a							
ä	b							
Š	С							<u> </u>
Ser	d							
am	е						<del></del>	
oge	f	All other program service revenue	e (				<u> </u>	L
<u> </u>	g	Total. Add lines 2a-2f					·	<del></del>
	3	Investment income (including of	divide	ends, interest,				
		and other similar amounts)		<b>•</b>	1,224			1,224
	4	Income from investment of tax-exem	npt bo	nd proceeds 🕨			<u> </u>	
	5	Royalties		. >			<del> </del>	
		(ı) Real		(ii) Personal	'		Ĭ	
	6a	Gross rents			:		1	
	þ	Less: rental expenses		<del>-</del>	ĺ		}	
	С	Rental income or (loss)						
	d	Net rental income or (loss)		<b>•</b>			<b></b>	
	7a	Gross amount from sales of (i) Securities	es ———	(II) Other	-			
	١.	assets other than inventory						
	p	Less cost or other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (loss)			ĺ			
	"	rect gain or (loss)		<u> </u>				
Revenue	8a	Gross income from fundraising			ļ			
Ž.	1	events (not including \$						
Ŗ.		of contributions reported on line 1c	<del>;</del>					
ē		See Part IV, line 18	. а		·			
Other	b	Less direct expenses	b					1
	С	Net income or (loss) from fundrai	ısıng	events >				
	9a	Gross income from gaming activit	ties.					
		See Part IV, line 19	· a					
	b	Less direct expenses	b					
	C		g acti	vities >				
	10a		ess					
		returns and allowances	а					
	b	Less cost of goods sold	b				i	
	С		of inv	entory <b>&gt;</b>			<u></u>	
		Miscellaneous Revenue		Business Code				
	11a	Rebate			32		ļ	
	b							
	C					<u> </u>		
	d			L				
	е			<b>&gt;</b>				
	12	Total revenue. See instructions		▶	1.333.050		1	1.224

### Part IX Statement of Functional Expenses

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

o no	Check if Schedule O contains a respons include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
b. 9b	and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	54,190	54,190		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	65,640	65,640		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the United States See Part IV, lines 15 and 16	476,108	476,018		
4	Benefits paid to or for members				• • • • • • • • • • • • • • • • • • • •
5	Compensation of current officers, directors, trustees, and key employees	91,200	61,560	18,240	11,40
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	242,317	178,458	23,932	39,92
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				<u></u>
9	Other employee benefits	163	98	32	3
10	Payroll taxes	25,781	16,613	3,362	5,80
11	Fees for services (non-employees)				
а	Management				
b	Legal .				
С	Accounting .				
d	Lobbying				
e f	Professional fundraising services See Part IV, line 17 Investment management fees				
g	Other .	3,925	2,124	1,527	27
12	Advertising and promotion	2,840	1,988	284	56
13	Office expenses				
14	Information technology .	2,434	1,383	404	64
15	Royalties				
16	Occupancy	14,424	10,277	1,382	2,76
17	Travel	30,509	28,984	915	61
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,650	1,825	730	1,09
20	Interest	56	34	11	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,639	6,047	864	1,72
23	Insurance	216	129	43	
24	Other expenses Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
_	Statement 1	79,213	58,319	6 467	44.4
a b	Statement	75,213	38,319	6,467	14,4
C					
d	***************************************				<del></del>
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,101,305	963,777	58,193	79,3
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   if following SOP 98-2 (ASC 958-720)				,.

٠	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
1	1	Cash—non-interest-bearing	166,728	1	311,19
	2	Savings and temporary cash investments	2,825	2	102,91
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net .		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
3	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
H23CL3	7	Notes and loans receivable, net	,	7	49,40
₹	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	·	9	
	10a	Land, buildings, and equipment cost or		<del></del>	
1		other basis Complete Part VI of Schedule D 10a 98,302		l	
	b	Less accumulated depreciation 10b 85,823	14,260	10c	12,47
ł	11	Investments – publicly traded securities	<u>,                                    </u>	11	
ĺ	12	Investments—other securities See Part IV, line 11	296,586	12	297,80
	13	Investments – program-related See Part IV, line 11	<u></u>	13	
	14	Intangible assets		14	<del>-</del>
- 1	15	Other assets See Part IV, line 11	4,400	15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	484,799	16	773,79
1	17	Accounts payable and accrued expenses	0	17	35
	18	Grants payable		18	56,90
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			
ă		•		22	<del></del>
-	23	Secured mortgages and notes payable to unrelated third parties		23	
ı	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	_	57,25
Net Assets or Fund Balances	-	Organizations that follow SFAS 117, check here ► ☐ and complete lines 27 through 29, and lines 33 and 34.			,
등	27	Unrestricted net assets .	484,799	27	716,54
na	28	Temporarily restricted net assets	0	28	
╒┃	29	Permanently restricted net assets .		29	
2		Organizations that do not follow SFAS 117, check here ▶ ☐ and			
5		complete lines 30 through 34.			
Sia	30	Capital stock or trust principal, or current funds		30	
20	31	Paid-in or capital surplus, or land, building, or equipment fund		31	1
۲	32	Retained earnings, endowment, accumulated income, or other funds		32	
<u> </u>	33	Total net assets or fund balances .	484,799		716,19
- 1	34	Total liabilities and net assets/fund balances	484,799	34	773,79

Form 9	90 (2011)		Page 1
Par	XI Reconciliation of Net Assets		
	Check if Schedule O contains a response to any question in this Part XI .	·	<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	111	1,333,05
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,101,30
3	Revenue less expenses Subtract line 2 from line 1	3	231,74
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	484 79

Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6 716,544 Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Yes Nο Other Hybrid If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a b Were the organization's financial statements audited by an independent accountant? 2b c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? За

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2011)

3b

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

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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

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

OMB No 1545-0047

Open to Public: Inspection

Name	of the organization						Ε	mployer id	entification	number	•	
	ERSTONE MINIST								91-155			
Par			ity Status (All orgai						nstructio	ns		
1 2	<ul><li>✓ A church, conv</li><li>✓ A school descr</li><li>✓ A hospital or a</li></ul>	rention of church libed in section cooperative hos	tion because it is (Foi les, or association of 170(b)(1)(A)(ii). (Attac pital service organiza	churches h Schedu Ition desc	describe le E ) cribed in s	ed in sect	70(b)(1)(	b)(1)(A)(ı) A)(iii).				
4	hospital's name, city, and state.											
5	section 170(b)(1)(A)(iv). (Complete Part II)											
6 7												
8	☐ A community t	rust described in	section 170(b)(1)(A)	<b>(vi).</b> (Cor	nplete Pa	rt II )						
9	receipts from support from	activities related gross investmei	receives (1) more that I to its exempt functi nt income and unrel fter June 30, 1975 Se	ions-sul lated bus	oject to c siness tax	ertain ex kable inc	ceptions ome (les	, and (2) is section	no more	than	331/39	% of its
10	An organizatio	n organized and	operated exclusively	to test fo	r public s	safety Se	e sectio	n 509(a)(	4).			
11	purposes of o	ne or more pub	d operated exclusive licly supported organ describes the type of s	nizations	described	d in sect	ion 509(a	)(1) or se	ection 509	9(a)(2)	See	
е	other than fou or section 509	ndation manage (a)(2)	that the organization rs and other than one	e or more	ntrolled d publicly	irectly or support	ndirectled organi	zations o	or more of described	ın sec	lified tion 5	persons 509(a)(1
f	If the organization, organizat		written determination.	on from :	the IRS t	hat it is	а Туре	I, Type I	ll, or Typ	e III s	uppoi	rting
9	Since August following pers		ne organization acces	pted any	gift or co	ontributio	n from a	ny of the	<b>;</b>			
			ndirectly controls, eithody of the supported of			her with	persons	describe	d ın (ıı) ar	nd [119	Y (	es No
	(ii) A family m	ember of a perso	on described in (i) abo	ove? .						110	ı(ii)	
	(iii) A 35% cor	ntrolled entity of	a person described in	ı (ı) or (ıı) :	above?					11g	(iri)	
h	Provide the fo	llowing informati	on about the support	ed organ	zation(s)	<u>.</u>						
(1)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col (i) li	organization sted in your document?	the organ	rou notify nization in of your port?	organizat (i) organi	ls the tion in col zed in the S ?	(vii	) Amou suppo	
				Yes	No	Yes	No	Yes	No			
(A)												
(B)										1		
(C)	<u>.</u>			 								
(D)												
(E)												

Total

Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.)

Section	on A. Public Support							
Calenc	dar year (or fiscal year beginning in) 🕨	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					able		
3	The value of services or facilities furnished by a governmental unit to the organization without charge				APPL1	CABIL		
4	Total. Add lines 1 through 3	L						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)			701				
6	Public support. Subtract line 5 from line 4	<u> </u>	<u> </u>					
	on B. Total Support	<del></del>	T		····		, -	
	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
7	Amounts from line 4 .		ļ		ļ	<del>  -</del>	ļ <u>-</u>	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .				سا ۾ پ	cable		
9	Net income from unrelated business activities, whether or not the business is regularly carried on			201	Dr.			
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) .							
11	Total support. Add lines 7 through 10					Ţ.		
12	Gross receipts from related activities, etc					12		
13	First five years. If the Form 990 is for the		n's first, secon	id, third, fourth	n, or fifth tax y	ear as a section	on 501(c)(3)	
	organization, check this box and stop he				· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>	
	on C. Computation of Public Suppo							
14	Public support percentage for 2011 (line		•	11, column (f))		14	%	
15	Public support percentage from 2010 Sc				 d lung 14 ig 22	15	%	
16a	331/3% support test—2011. If the organ box and stop here. The organization qua							
b	331/3% support test—2010. If the orga			=			or more	
U					•			
17a	10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported							
	organization .	2040 16 #5 -			40 4	C- 40b - 47		
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization response in Part IV how the organization response in Part IV how the organization response.	ation meets th	e "facts-and-c	ircumstances"	test, check t	his box and s	top here	
	supported organization						. • [	
18	Private foundation. If the organization constructions	Jid not check a	a box on line 13	3, 16a, 16b, 17 	a, or 17b, ched	ck this box and	lsee ▶ [	

#### Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . . Gross receipts from activities that are not an unrelated trade or business under section 513 revenues levied for organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5 000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b ' Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or 12 loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add lines 9, 10c, 11,

	and 12)		
14	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax organization, check this box and stop here	year as a se	ction 501(c)(3)
Sect	on C. Computation of Public Support Percentage		=
15	Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2010 Schedule A, Part III, line 15	16	%
Sect	on D. Computation of Investment Income Percentage		
17	Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from 2010 Schedule A, Part III, line 17	18	%
19a	331/3% support tests-2011. If the organization did not check the box on line 14, and line 15 is		•
	17 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly sup	ported organ	iization . 🕨 🗌
b	331/3% support tests – 2010. If the organization did not check a box on line 14 or line 19a, and line line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly		•

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

Statement 1				
	Corpo	rstone Ministries 1	n+11	
		Other Expenses	TIL I	
		Year 2011	<del></del>	
		Teal 2011		
	Total	Program	Admin	Fund Raising
Alarm	360	252	36	72
Bank Charges	3,242	2,269	324	648
Books	2,098	2,098		
Consulting	36,000	25,200	3,600	7,200
Credit Card Fee	203	-	203	
Editing Fee				-
Flowers	- 1	<u> </u>	<del></del>	
Franchise Tax	T - +			
Freight	390	390	<del></del>	
Gasoline	1,293	905	129	259
Gift	440			
Hotel	667	667		770
Licenses				
Meals	6,498	4,188	847	1,463
Medicine	255	255	- 047	1,400
Meeting Exp	14	9		. 3
Membership	245	172	25	49
Miscellaneous	- 243			
Moving Exp	<del></del>	<del></del>		
NSF Checks	200		200	
Parking	147	103	15	29
II dikirig	39	- 105	39	
Photos	61	61		
Post Box Fee	118	83	12	. 24
Postage	10,728	10,728		. 24
Postage	1,785	1,250	179	357
Property Tax	384	269	38	77
Rental Car	2,538	2,538		<u>-</u> -
Rent Furniture	2,000	2,000		
Repair	<del>                                     </del>			<del></del>
Shipping	70	70		
Storage	500	500		<u> </u>
Subscription	282	197	28	56
Supplies-Ministry	566	566		
Supplies-Millistry Supplies-Office	3,739	2,617	374	748
Supplies-Office Supplies-Pastoral	2,167	2,017		2,167
Supplies-Teaching	2,107	<del></del>		2,107
Tax-Others			<del></del>	·
Telephone	4,169	2 010	417	834
Transportation	15	2,919 15		. 034
Wire Fee	10	10	<del></del>	<del></del>
vviie ree	79,213	50 210	6 467	14.426
L	19,213	58,319	6,467	14,426

# (Form 990)

### **Supplemental Financial Statements**

Employer identification number

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organizatio

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

CORNERSTONE MINISTRIES INTERNATIONAL Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts, Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☑ Yes 🗀 No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c С Number of conservation easements included in (c) acquired after 8/11/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, releases extinguished, or terminated by the organization during the tax vear ▶ Number of states where property subject to conservation ease went is located ▶ 4 Does the organization have a written policy regarding that periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements t holds? ☐ Yes ☐ No 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III

# Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide on Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
  - (i) Revenues included in Form 990, Part VIII, line 1
  - (ii) Assets included in Form 990, Part X
- If the organization received or held works of art, historical treasures, or other similar assets following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenues included in Form 990, Part VIII, line 1
- b Assets included in Form 990, Part X

<b>▶</b> \$		 
for financial	gaın,	

	~	7.0000	morage a		7, 1 WILL			
For	Par	perwork	Reduction	Act Notice,	see the	Instructions	for Form	990.

Part	Organizations Maintaining	Collections of	Art, Hist	orical T	reasures,	or Oth	ner Similar As:	sets (continued)
	Using the organization's acquisition, a collection items (check all that apply)							
a	<ul><li>Public exhibition</li></ul>				or exchange	e progr	ams	
b	Scholarly research		е [	Other	***			
C	□ Preservation for future generations							
4	Provide a description of the organizat	ion's collections	and expla	in how th	ney further t	he org	anızatıon's exem	pt purpose in Part
_	XIV		d a a a b. a a .	1				
5	During the year, did the organization assets to be sold to raise funds rather							r 🗌 Yes 🗌 No
Part								
i ai t	line 9, or reported an amoun				amzanoma	IIISWCI	ed yes 1010	mi 990, rantiv,
1a	is the organization an agent, trustee,				or contributi	ons, or	other assets no	t
	included on Form 990, Part X? .					0,1	/-	☐ Yes ☐ No
b	If "Yes," explain the arrangement in Pa	art XIV and compl	ete the fo	llowing ta	able	<b>Y/</b>		
					able CM		Ar	nount
С	Beginning balance				V	1c		
d	Additions during the year	•			۱ ا	1d		
е	Distributions during the year			1	•	1e		
f	Ending balance		•			11		
2a	Did the organization include an amount if "Yes," avalers the assessment in D		art X, line	<i>?</i> \\''				☐ Yes ☐ No
b Par	If "Yes," explain the arrangement in Particle Fig. 1. Endowment Funds. Complete States of the Arrangement of		zation an	swered	"Ves" to F	orm 90	20 Part IV line	10
T OI	Endowinent i unus. Compi	(a) Current year	(b) Pric		(c) Two years		<del></del>	
1a	Beginning of year balance	1			(1)		(1, 11, 11, 11, 11, 11, 11, 11, 11, 11,	(0) - 00 - 700 - 000 -
b	Contributions	1	<del> </del>					<del></del>
c	Net investment earnings, gains, and	(0	<del> </del>		<del>                                     </del>			· · · · · · · · · · · · · · · · · · ·
	losses	_/ _/						
d	Grants or scholarships							
е	Other expenditures for facilities and	/					<u> </u>	,
	programs							
f	Administrative expenses							,
g	End of year balance	<u> </u>	<u> </u>		<u> </u>			<u> </u>
2	Provide the estimated percentage of t		nd baland	e (line 1ç	3, column (a)	)) held a	as	
а	Board designated or quasi-endowme		%					
b	Permanent endowment	% %						
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2		00%					
За	Are there endowment funds not in th			zation th	at are held :	and ad	ministered for th	ρ.
-	organization by	o paracono			at at o more	u., u.u		Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations	•		-			•	3a(ii)
b	If "Yes" to 3a(ii), are the related organ	izations listed as	required o	n Sched	lule R?			3b
4	Describe in Part XIV the intended use							<del>\</del>
Par	t VI Land, Buildings, and Equip	oment. See Fori	n 990, P	art X, lın	e 10.			
	Description of property	(a) Cost or o		1 ' '	or other basis other)		Accumulated epreciation	(d) Book value
1a	Land			<u> </u>				<del> </del>
b	Buildings							
С	Leasehold improvements				9,000		5,668	3,332
d	Equipment				92,302		80,155	9,147
e	Other	·						
Total	. Add lines 1a through 1e (Column (d) i	must equal Form !	990, Part	X, colum	n (B), line 10	)(c) )	<b>&gt;</b>	12,479
							Sohe	edule D (Form 990) 2011

Part VII Investments — Other Securities. See Form 990, Part X, Inne 12.  (a) Description of security or category (including name of security)  (b) Book value  (c) Method of valuation Cost or end-of-year market valuation Cost or end-o	alue
(2) Closely-held equity interests (3) Other (A) (B) (C) (D)	
(2) Closely-held equity interests (3) Other (A) (B) (C) (D)	
(A) (B) (C) (D)	
(B) (C) (D)	
(C) (D)	
(D)	
(E) (F)	
(G)	
(H)	
(1)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12 ) ▶	-
Part VIII Investments – Program Related. See Form 990, Part X, line 13.	<del></del>
(a) Description of investment type (b) Book value (c) Method of valuation Cost or end-of-year market value	alue
(1) Certificate of Deposit 297,808 Cost	
(2)	
(3)	
(4)	
(5)	
(6)	
(7) (8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 ) ▶	<del></del> -
Part IX Other Assets. See Form 990, Part X, line 15.	
(a) Description	(b) Book value
(1)	
(2)	
(3)	<del></del>
(4) (5)	<del></del>
(6)	<del></del>
(7)	
(8)	· · · · · · · · · · · · · · · · · · ·
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15 )	
Part X Other Liabilities. See Form 990, Part X, line 25.	
1. (a) Description of liability (b) Book value  (1) Federal income taxes	
(2)	•
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	_
(10)	-
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ►  2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements	that reports the

2. FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

	XI Reconciliation of Change in Net Assets from Form 990 to	o Audited Financial S	tatem	ents	
2	Total revenue (Form 990, Part VIII, column (A), line 12)		-T	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)		ſ	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		ſ	3	
4	Net unrealized gains (losses) on investments		Ī	4	
5	Donated services and use of facilities	-	Γ	5	
6	Investment expenses		[	6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4 through 8		ſ	9	
_	Excess or (deficit) for the year per audited financial statements. Comb	oine lines 3 and 9		10	
art	Reconciliation of Revenue per Audited Financial State	ements With Revent	ıe per	Retur	n
1	Total revenue, gains, and other support per audited financial statemen	nts .		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a		_]	
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c		]	
d	Other (Describe in Part XIV)	2d		7	
е	Add lines 2a through 2d	•		2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1 1	
b	Other (Describe in Part XIV)	4b	-	7	
С	Add lines 4a and 4b	<u> </u>		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I,	line 12)		5	
<u>a</u> rt	Reconciliation of Expenses per Audited Financial Sta	itements With Exper	ises p	er Ret	urn
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a		] [	
b	Prior year adjustments	2b		] [	
С	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
4	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1	
4 a	Other (Describe in Part XIV)	4b		7 1	
	Other (Describe in Fait XIV)				
a b	Add lines 4a and 4b			4c	
a b	,		•	4c 5	

### SCHEDULE F (Form 990)

### **Statement of Activities Outside the United States**

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 2011 Open to Public Inspection

Department of the Treasury Internal Revenue Service

	of the organization NERSTONE MINISTRIES INTERN	IATIONAL					entification number -1550156
Par	General Information Form 990, Part IV, line		es Outside t	the United States. Comp	plete if the organiza	ation ansv	vered "Yes" to
1	For grantmakers. Does the assistance, the grantees' eligrants or assistance?						☐Yes ☐No
2	For grantmakers. Describe assistance outside the Unite		the organizati	on's procedures for moni	toring the use of	its grants	s and other
3	Activities per Region (The fo	ollowing Part	l, line 3 table o	can be duplicated if addition	nal space is neede	d)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed a program serv describe specific service(s) in reg	rice, type of	(f) Total expenditures for and investments in region
(1)	East Asia	2	2	Program Services	Bible Delivery		174,955
(2)					Leadership Trainii	ng	40,978
(3)					Missionary Trainir	ng	34,896
(4)				,	Church Planting		32,885
(5)					Humanitarian Ass	istance	186,395
(6)	South Asia	<u></u>	1	Program Services	Leadership Trainii	ng	6,000
(7)							
(8)							

(17)

3a Sub-total

**b** Total from continuation sheets to Part I c Totals (add lines 3a and 3b) 476,108

476,108

page 2 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed. Part II

(i) Method of valuation (book, FMV, appraisal. other)																	
(h) Description of non-cash assistance															< ·		
(g) Amount of non-cash assistance								i									
(f) Manner of cash disbursement	Wire	Wire	6,000 Checks														3 - Jr - J
(e) Amount of cash grant	159,850 Wire	151,900 Wire	6,000														-
(d) Purpose of grant	Program	Program	Program														
(c) Region	East Asia		,														
(b) IRS code section and EIN (if applicable)																	,
(a) Name of organization				<b>.</b>	-	- 4		-			·	- -	-				L
-	Ξ	<u> </u>	<u>ල</u>	<u>4</u>	(2)	(9)	<u> </u>	<u>@</u>	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	,

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

Enter total number of other organizations or entitles က

3 3 ▲ Schedule F (Form 990) 2011

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16 Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2011

Part III Grants ar

(h) Method of valuation (hook FMV)																			
(g) Description	ol non-cash																		
(f) Amount of non-cash	assistance											;							
(e) Manner of cash	cisbursement	158,358 Wire/Checks				<u></u>													
(d) Amount of	cash grant	158,358			:														
(c) Number of	recipients	s																	
Part III can be duplicated if additional space of grant or assistance (b) Region		East Asia																	
Part III can be duplic (a) Type of grant or assistance		(1) Support	(2)	(3)	(4)	(5)	(9)	(2)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)

art	V	Foreign Forms		
1	the c	the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign poration (see Instructions for Form 926)	☐ Yes	☑ No
2	may Rece	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and eight of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a Owner (see Instructions for Forms 3520 and 3520-A).	Yes	☑ No
3	the c	the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To ain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	☑ No
4	qual Infor	the organization a direct or indirect shareholder of a passive foreign investment company or a lifted electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, rmation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing d. (see Instructions for Form 8621)	Yes	☑ No
5	the	the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain eign Partnerships (see Instructions for Form 8865)	☐ Yes	☑ №
6	"Yes	the organization have any operations in or related to any boycotting countries during the tax year? If s," the organization may be required to file Form 5713, International Boycott Report (see Instructions Form 5713)	☐ Yes	☑ No
			Schedule F (For	m 990) 2011

		_	
Pai	t	V	

#### Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs. expenditures per region); Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable Also complete this part to provide any additional information (see instructions).

We have dispatched missionaries after internal training on record keeping. Each missionary is required to report
the expenses on monthly basis and annual visitation is made to insure the accuracy and reliability of the record
by reviewing the project and documentation. All foreign operation requires to have an accountant and cashier separately
and they also report their activities

**SCHEDULE 1** (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

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

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

▶ Attach to Form 990.

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201	en to P nspecti
(SA)	일드

OMB No 1545-0047

CORNERSTONE MINISTRIES INTERNATIONAL	IATIONAL						91-1550156
Part   General Information on Grants and Assistance	on Grants and	Assistance					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	ain records to sub	stantiate the amor	unt of the grants o	r assistance, the g	rantees' eligibility for	the grants or assist	ance, and
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ization's procedu	res for monitoring	the use of grant fu	nds in the United		· · ·	
Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Death loss by Hongard if additional page is paged.	ssistance to Go line 21, for any	vernments and recipient that rec	Organizations	in the United S \$5,000. Check	ates. Complete if	the organization a ecipient received i	nswered "Yes" more than \$5,000.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) China Harvest, PO Box 12249 Witchita, KS 67277-2249	54-1852027	501(c) (3)	17,000				
(2) I-Media , 9812 Falls Road #114-116, Potomac, MD 20854			37,190				
(3)							
(4)							
(5)							
(9)							
(2)							
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government	501(c)(3) and gov	ernment organizat	organizations listed in the line 1 table	ne 1 table			<b>A</b>
5 Enter total number of other organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990.	rganizations listed	in the line 1 table for Form 990.			Cat No 50055P		Schadula (Form 000) (2001)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. Part III

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Missionary Support	m	11,640	0	0 Book	
2 Bible Translation	_	54,000	0	0 Book	
3					
4					
5					
9					
7					
Part IV Supplemental Information. Complete this		vide the information	n required in Part I,	oart to provide the information required in Part I, line 2, and any other additional information.	litional information.
We receive a report from mission organization periodically and receive receipt for the fund transmit for radio project. Our field worker monitor radio output	ally and receive rece	pt for the fund transm	t for radio project Ou	r field worker monitor radio o	utput
		1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
-			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
-					
					Schedule I (Form 990) (2011)

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

### Supplemental Information to Form 990 or 990-EZ

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

2011
Open to Public Inspection

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or 990-FZ.

**CORNERSTONE MINISTRIES INTERNATIONAL** 91-1550156 Line 4d, Part III Other Program Services, Form 990 ) (Total Expenses 61,657 ) (Grants and Allocations: 44,042 (Code We have networked with the existing local leaders and pastors of the persecuted church in North Korea and to assist them furthering in church planting and pastoring churches in their surrounding. We facilitate and assist those pastors who are willing to plant to a church in their neighborhood. We have trained 263 students at 12 training shelters for them to return to North Korea to plant churches Line 4d, Part III Other Program Services, Form 990 ) (Total Expenses 238,237 ) (Grants and Allocations: 186,395 (Code Providing humanitarian assistance to people in North Korea, refugees of North Korea in China, North Korean orphans in China, and other nations. Through humanitarian assistance we share the love of Jesus Christ and to meet their immediate survival needs Often this assistance leads to introduce the Gospel, but not required to receive aids. We assist the needy people in the Gospel restricted nations with foods, clothes, medicines, other necessity items. Three workers were detained in the North Korea over 7 months and medical expenses incurred after released. We sent two medical teams to care of orphans in China. We also sent over 60 tons of rice and flour to help underground believers in North Korea Line 2, Part VI, Form 990 Name Relationship President **Brother** Isaac Lee Peter Lee **Executive Director** Brother

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lame of the organization	Employer identification number
CORNERSTONE MINISTRIES INTERNATIONAL	91-1550156
Line 11a, Section B, Part VI, Form 990 <sup>.</sup>	
The executive committee of the board review the form 990 before its filing	
Land Control D. Don M. France 200	
Line 12c, Section B, Part VI, Form 990·	
Officers directors and key employees are required to disclose immediately any conflicts which may expend	_
Officers, directors, and key employees are required to disclose immediately any conflicts which may aris	e 
Line 19, Section C, Part VI, Form 990	
The organization's article of incorporation, by-laws, and financial statements are made available upon rec	quest
	·
	•••••
•	

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

### Supplemental Information to Form 990 or 990-EZ

2011

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

▶ Attach to Form 990 or 990-EZ,

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number CORNERSTONE MINISTRIES INTERNATIONAL 91-1550156 Explanation for filing the return before actual receipt of notification of extension As of September 5th, 2012 we have not received the notification of requested extension (requested to extend until November 15, 2012) Yet, the return is ready to submit it. Therefore, we are filing the return with a copy of form 8868, Part II (Additional 3-Month extension)

Statement 2				
	Corporatono Muni	otrice lett		
	Cornerstone Mini			
<del></del>	Recap of Expens	ses	·····	'
	Year 2011			<u> </u>
· · · · · · · · · · · · · · · · · · ·	Total	Program	Admin	Fund Raising
Occupancy				
Rent-Office	13,824	9,677	1,382	2,765
Rent-Campus				,
Rental-Housing	600	600		· -
	14,424	10,277	1,382	2,765
Conference Exp				
Conference Exp	3,650	1,825	730	1,095
Exhibit Expenses	3,030	1,040	/ 30	1,095
Exhibit Expenses	3,650	1,825	730	1,095
Information Technology				<u> </u> 
Internet Service	1,605	803	321	482
Web Service	-	-		
Computer Software	69	48	7	14
Supplies-Computer	760	532	76	152
	2,434	1,383	404	647
Fees for Service-Other			·	<u></u>
Custom Clearance Fee	945		945	_
Filing Fee	85		85	_
Fee and Permit	330_	_	330	
Notary Fee	30	_	30	-
Service Fee	1,371	960	137	274
Visa Fee	1,164	1,164		_
	3,925	2,124	1,527	274
Payroll Tax				
FICA	20,678	13,325	2,696	4,657
Medicare	4,836	3,116	631	1,089
IRS	266	172	35	60
	25,781	16,613	3,362	5,806

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Statement 3

Cornerstone Ministries International Fixed Asset Schedule 2011

				_				_							ì
		Balance		O	,	124	'	O		256	3,705	3,485	5,510		12,480
Accumulated	Depreciation	2011	15,418	5,255	7,545	3,701	7,093	15,983	7,722	9,814	8,987	2 958	1,348	1	85.822
	Depreciation	2011	t	i	1	ı	1	ı	240	1,707	3,481	1,863	1,348	,	8.639
Accumulated	Depreciation	2010	15,418	5,255	7,545	3,701	7,093	15,983	7,482	8,106	5,506	1,094			77.183
		Total	15,418	5,255	7,545	3,825	7,093	15,983	7,722	10,070	12,692	6,442	6,858	900	98.302
Leaschold	Improve	ments									000'6		1	1	000.6
	Office	Equipinent	2,419	1,285	ı	ı	2,567	4,231	1,831			372	1		12,704
	Telephone	Equipment	1	I	ı	ı	ı		1,276	1,969		367	1		3,612
		Camera	1	ı	1	1	1,373	350	355	1,774		513	ı		4,366
		Furniture	1	1,758	ı	1,040	1,282		ı				ı		4,080
		Computer	5,999	2,212	2,844	1,583	1,870	7,142	4,260	6,327	3,692	3,291	6,858		39,221
	Radio/Sound	Equipment	1	1	4,701	1,201	ı	4,259				1,900	1		12,061
	1	Automobile	2,000	ŀ	ı	1	1						1		2,000
		Year	2001	2005	2003	2004	2005	2006	2007	2008	2009	2010	2011	AD	•

# Cornerstone Ministries Int'l 2011

	<u>Program</u>	Delivery of The Word	Support of Ministries (Leadership	Mobilazatio n & Preaching	Church Planting	Pre-Evangelism thru Humanitarian Assistance		
Project Expenses	456,190	174.955	40,978	20,978	32,885	186,395		
Support	48,558	-	30,318	18,240	-	-		
Bible Translation	54,000	54,000	-	-	-	-		
Radio Program	37,190	14,876	11,157	-	11,157			
Total	595,938	243,831	82,453	39,218	44,042	186,395		

]	Recap					
	Program	Delivery of The Word	Support of Ministries (Leadership	Mobilazatio n & Preaching	Church Planting	Pre-Evangelism thru Humanitarian Assistance
US						
Organizations	54,190	-	17,000	-	37,190	-
Individuals	65,640	54,000	-	11,640	-	-
Foreign Organizatio	ns					
China	159,850	41,955	40,978	20,978	13,985	41,955
Korea	151,900	133,000	-	-	18,900	-
India	6,000	-	6,000	-	-	-
<del>-</del>	317,750	174,955	46,978	20,978	32,885	41,955
Foreign Individuals						
China	155,358	-	_	10,918	-	144,440
Korea	3,000	-	_	3,000	-	•
India	· -	-	-	-	-	-
_	158,358	··	-	13,918	_	144,440
Total Foreign	476,108	174,955	46,978	34,896	32,885	186,395
Recap:Total Foreign	1					
China	315,208	41,955	40,978	31,896	13,985	186,395
Korea	154,900	133,000	-	3,000	18,900	-
India	6,000		6,000	· -		-
Total	476,108				32,885	186,395
Total _	595,938	228,955	63,978	46,536	70,075	186,395

-	are filing for an Additional (Not Automatic) 3-M						▶ 🗸
	nly complete Part II if you have already been gra are filing for an Automatic 3-Month Extension,			on a previously	tilea	Form 88	868
Part II				iginal (no coni	96 06	odod)	
-t er e in	Additional (Not Automatic) o-Month	Atension		filer's identifying		<u>_</u> _	instructions
	Name of exempt organization or other filer, see	instructions	Litter	Employer identifi		<u> </u>	
Type or print	or					50156	(2114) 01
•	Number, street, and room or suite no. If a P.O. t			Social security n			<del></del>
File by the due date fi		· · <b>,</b> - · · · · · · · · ·		_ •		(22:4)	
filing your	City, town or post office, state, and ZIP code Fi	or a foreign a					
return See instruction		_					
Enter the	e Return code for the return that this application	is for (file a	separate application for e	ach return)			0 1
Applica	ation	Return	Application	<del></del>			Return
ls For		Code	Is For				Code
Form 9	90	01	· · · · · · · · · · · · · · · · · · ·				<del> </del>
Form 9		02	Form 1041-A	<del></del>			08
Form 9	90-EZ	01	Form 4720				09
Form 9	90-PF	04	Form 5227				10
Form 9	90-T (sec 401(a) or 408(a) trust)	05	Form 6069				11
Form 9	90-T (trust other than above)	06	Form 8870				12
STOPLE	o not complete Part II if you were not already g	ranted an a	utomatic 3-month extension	on on a previous	مارا با	d Form	8888
	whole group, check this box  • I the names and EINs of all members the extensi	•	t of the group, check this	box	<b>\</b>	and a	ttach a
4 1	request an additional 3-month extension of time	e until	NOVEMBER 15,	, 20 12	!		
5	For calendar year 2011, or other tax year beginn	ning	, 20 , a	nd ending			, 20
	f the tax year entered in line 5 is for less than 12						
(	☐ Change in accounting period						
	State in detail why you need the extension Ad						
-	as we need additional expenditure information from		ojects and it is anticipated t	hat the return wil	l be p	repared	
-	and submitted prior to the requested extended tim	e 					
	Adhira analysistica in for Farra 000 DL 000 DE 0	00 T 4700	ar COCO anter the tentation	o tou loop on			
	f this application is for Form 990-BL, 990-PF, 9 nonrefundable credits. See instructions.	90-1, 4720,	or 6069, enter the tentativ	re tax, less any			
	If this application is for Form 990-PF, 990-T,	4720 or 6	COCO antor any refundat	lo gradita and	8a	<b>3</b>	
	estimated tax payments made Include any pi				1	1	
	amount paid previously with Form 8868	ioi yeai ev	erpayment anowed as a	credit and any	8b	s	
	Balance due. Subtract line 8b from line 8a Include	your paymer	nt with this form, if required.	by using EFTPS	05	<u> </u>	
	(Electronic Federal Tax Payment System) See instri		,		8c	\$	0
	Signature and Verific	cation mus	t be completed for Pa	rt II only.		·	
	penalties of perjury, I declare that I have examined lige and belief, it is true, correct, and complete, and the			lules and stateme	ents, a	ınd to th	e best of my
Knowiec	ige and belief, it is true, dorrect, and complete, and the	acı din dülillör	ized to prepare this form			Δ <i>1</i>	,
Signature	· I ster Der.	Title	Executive Director	D:	ate ►	1//	1/200
5.3.14.010	1 200 1100		EXECUTIVE DISCLOS			886	8 (Pay 1.2012)