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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 2011 Open to Public Inspection
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012		D Employer identification number 74-2938033	
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization FRIENDS OF THE BRIDEGROOM		E Telephone number (813) 763-0200
	Doing Business As		G Gross receipts \$ 23,107,501
	Number and street (or P O box if mail is not delivered to street address) 3535 EAST RED BRIDGE ROAD	Room/suite	
	City or town, state or country, and ZIP + 4 KANSAS CITY, MO 64137		
	F Name and address of principal officer SIANG CHET LIM 3535 EAST RED BRIDGE ROAD KANSAS CITY, MO 64137		H(a) Is this a group return for affiliates? ☐ Yes ☒ No
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () (Insert no) ☐ 4947(a)(1) or ☐ 527		H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions)	
J Website: WWW.FOTB.COM		H(c) Group exemption number ▶	
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of formation 1999	M State of legal domicile MO

Part I		Summary	
Activities & Governance	1 Briefly describe the organization's mission or most significant activities TO HELP CHRISTIANS INCREASE THEIR LOVE AND DEVOTION TO GOD 		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	8
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	2
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	413
	6 Total number of volunteers (estimate if necessary)	6	150
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	32,621
	b Net unrelated business taxable income from Form 990-T, line 34	7b	18,276
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	14,799,008	11,903,411
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	6,203,963	6,399,409
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,689	10,265
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,677,633	1,783,567
		22,687,293	20,096,652
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,062,320	1,629,765
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	8,759,812	8,366,551
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ☒ 282,332		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	9,657,008	9,868,987
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	19,479,140	19,865,303
	19 Revenue less expenses Subtract line 18 from line 12	3,208,153	231,349
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	27,477,350	28,428,033
	21 Total liabilities (Part X, line 26)	8,291,111	9,016,045
	22 Net assets or fund balances Subtract line 21 from line 20	19,186,239	19,411,988

Part II		Signature Block	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
Sign Here	***** Signature of officer		2013-03-19 Date
	MARK SCHUMACHER CFO Type or print name and title		
Paid Preparer's Use Only	Preparer's signature	JOHN A PARRISH	Date
	Check if self-employed	☒	
	Preparer's taxpayer identification number (see instructions) P00048642		
Firm's name (or yours if self-employed), address, and ZIP + 4	KELLER & OWENS LLC		EIN
	10955 LOWELL AVE STE 800		48-1195228
	OVERLAND PARK, KS 66210		Phone no (913) 338-3500
May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No			

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization’s mission

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

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

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?

If “Yes,” describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 15,461,586 including grants of \$ 1,611,315) (Revenue \$ 10,738,778)

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

4b

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

4c

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

4d

Other program services (Describe in Schedule O)

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

4e

Total program service expenses \$ 15,461,586

Part IV

Checklist of Required Schedules

		Yes	No	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. 	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. 	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I 	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II and IV 	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV 	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response to any question in this Part V ☐			
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a	163
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	413
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	Yes
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a	No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a	
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
c	Enter the aggregate amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI

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

Section A. Governing Body and Management

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

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed ▶ _____
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ THE ORGANIZATION 3451 E RED BRIDGE ROAD KANSAS CITY, MO 64137 (816) 763-0200

Part VII

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MICHAEL BICKLE PRESIDENT	45 00	X		X				80,545	0	9,192
(2) ALLEN HOOD ASSOCIATE DIRECTOR	35 00	X						871	75,674	36,318
(3) MARCI SORGE SECRETARY	35 00	X		X				0	0	0
(4) JACK HILL TRUSTEE	10 00	X						0	37,500	0
(5) SIANG CHET LIM CEO	40 00	X		X				0	17,625	35,595
(6) MISTY EDWARDS TRUSTEE	30 00	X						0	61,931	0
(7) BILL HANEY TRUSTEE	5 00	X						0	0	0
(8) ELIZABETH HERDER TRUSTEE	10 00	X						0	23,500	0
(9) SCOTT EIBEL TRUSTEE	1 00	X						0	0	0
(10) MARK A SCHUMACHER TREASURER/CFO	30 00			X				36,000	0	0
(11) LEE PEAVY SECRETARY	30 00			X				0	19,300	0
(12) LENNY LAGUARDIA SENIOR VICE PRESIDENT	45 00			X				6	13,700	29,123
(13) ERIC OPPRIECHT SENIOR VICE PRESIDENT	40 00			X				0	29,696	30,820
(14) JEFF WESTERGARD CMO	5 00			X				0	0	0

Part VII

1b	Sub-Total	▼			
c	Total from continuation sheets to Part VII, Section A	▼			
d	Total (add lines 1b and 1c)	▼	117,422	278,926	141,048

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 0

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
TEMP-CON INC 15670 S KEELER STREET OLATHE, KS 66062	CONSTRUCTION	477,462
RESOURCE GROUP AV INC 1843 SHERWOOD LAKES BLVD LAKELAND, FL 33809	SOUND/LIGHTING	323,054
COMPLETE SYSTEMS INC 1311 W 13TH ST KANSAS CITY, MO 64102	CONSTRUCTION	257,996
SUMMIT LITHO INC 1807 SW MARKET STREET LEES SUMMIT, MO 64082	PRINTING	254,624
HEARTLAND PROPERTY SOLUTIONS LLC 10743 CYPRESS AVE KANSAS CITY, MO 64137	CONSTRUCTION	236,831

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►9

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d	1,406,511				
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	10,496,900				
	g	Noncash contributions included in lines 1a-1f \$ 26,201						
	h	Total. Add lines 1a-1f		11,903,411				
Program Service Revenue			Business Code					
	2a	REGISTRATION/APPLICATI	900099	6,397,438	6,397,438			
	b	VENDING INCOME FOR CON	900099	993	993			
	c	LATE FEES CHARGED	900099	978	978			
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		6,399,409				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		565			565	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties		94,746			94,746	
	6a		(i) Real	(ii) Personal				
		Gross rents	782,405					
		b Less rental expenses	807,783					
		c Rental income or (loss)	-25,378					
	d	Net rental income or (loss)		-25,378	-105,257	6,579	73,300	
	7a		(i) Securities	(ii) Other				
		Gross amount from sales of assets other than inventory		103,303				
		b Less cost or other basis and sales expenses		93,603				
		c Gain or (loss)		9,700				
	d	Net gain or (loss)		9,700			9,700	
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from fundraising events . .						
	9a	Gross income from gaming activities See Part IV, line 19	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from gaming activities . .						
	10a	Gross sales of inventory, less returns and allowances	a	3,671,170				
b	Less cost of goods sold	b	2,109,463					
c	Net income or (loss) from sales of inventory . .		1,561,707	1,561,142	565			
Miscellaneous Revenue		Business Code						
11a	INCOME FROM TAXABLE SU	900099	81,178			81,178		
b	DEPARTMENT FEES	900099	44,418		12,144	32,274		
c	OTHER SERVICE REV	541200	13,563	13,563				
d	All other revenue		13,333		13,333			
e	Total. Add lines 11a-11d		152,492					
12	Total revenue. See Instructions		20,096,652	7,868,857	32,621	291,763		

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)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	611,976	611,976		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	348,093	348,093		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	669,696	669,696		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	122,624	97,107	19,387	6,130
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	8,028,506	5,840,053	2,044,201	144,252
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	215,421	82,126	133,295	
11	Fees for services (non-employees)				
a	Management				
b	Legal	77,762		77,762	
c	Accounting	154,893		154,893	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	341,185	180,627	144,975	15,583
12	Advertising and promotion	125,123	100,733	19,378	5,012
13	Office expenses	1,214,142	896,492	282,676	34,974
14	Information technology	583,852	288,320	286,192	9,340
15	Royalties				
16	Occupancy	1,696,511	1,425,923	268,123	2,465
17	Travel	716,768	692,153	24,615	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,279,464	2,162,615	54,317	62,532
20	Interest	264,992	213,680	51,312	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,703,506	1,269,227	434,279	
23	Insurance	358,250	232,014	124,192	2,044
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	STREAMING	314,909	314,909		
b	BAD DEBT EXPENSE	26,128	26,128		
c	LICENSES AND PERMITS	9,182	8,123	1,059	
d	DUES & SUBSCRIPTIONS	2,320	1,591	729	
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	19,865,303	15,461,586	4,121,385	282,332
26	Joint costs. Check here ☒ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			165,880	1	94,272
	2	Savings and temporary cash investments			1,139,812	2	804,860
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			117,264	4	360,777
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			848,548	8	767,453
	9	Prepaid expenses and deferred charges			144,857	9	174,932
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	34,842,429			
	b	Less: accumulated depreciation	10b	9,399,632	24,095,251	10c	25,442,797
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 11			270,282	12	112,408
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			695,456	15	670,534
	16	Total assets. Add lines 1 through 15 (must equal line 34)			27,477,350	16	28,428,033
Liabilities	17	Accounts payable and accrued expenses			1,293,889	17	1,127,236
	18	Grants payable				18	
	19	Deferred revenue			854,863	19	798,691
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			6,137,492	23	7,081,414
	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			4,867	25	8,704
	26	Total liabilities. Add lines 17 through 25			8,291,111	26	9,016,045
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			18,574,554	27	18,822,307
	28	Temporarily restricted net assets			611,685	28	589,681
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			19,186,239	33	19,411,988
	34	Total liabilities and net assets/fund balances			27,477,350	34	28,428,033

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	20,096,652
2	Total expenses (must equal Part IX, column (A), line 25)	2	19,865,303
3	Revenue less expenses Subtract line 2 from line 1	3	231,349
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	19,186,239
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-5,600
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	19,411,988

Part XII Financial Statements and Reporting

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

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

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization FRIENDS OF THE BRIDEGROOM	Employer identification number 74-2938033
---	--

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

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

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☒

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

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

f

☐

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

g

☐

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

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

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

(iii)

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

h

☐

Provide the following information about the supported organization(s)

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

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

Part II

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support							
Calendar year (or fiscal year beginning in)		(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities, etc (See instructions)					12	
13	First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage		
14	Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14
15	Public Support Percentage for 2010 Schedule A, Part II, line 14	15
16a	33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☐
b	33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	☐
17a	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	☐
b	10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	☐
18	Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions	☐

Part IIISupport Schedule for Organizations Described in IRC 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
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	9,491,202	12,554,210	15,702,735	14,799,008	11,879,361	64,426,516
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	8,785,393	8,948,280	11,255,295	11,206,981	10,738,493	50,934,442
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	18,276,595	21,502,490	26,958,030	26,005,989	22,617,854	115,360,958
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	3,236,533	4,074,130	3,947,330	4,319,735	768,273	16,346,001
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	3,236,533	4,074,130	3,947,330	4,319,735	768,273	16,346,001
8 Public Support (Subtract line 7c from line 6)						99,014,957

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	18,276,595	21,502,490	26,958,030	26,005,989	22,617,854	115,360,958
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	300,020	55,212	234,321	198,801	182,297	970,651
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	300,020	55,212	234,321	198,801	182,297	970,651
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	5,162	1,222	3,211	18,720	20,477	48,792
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	42,989	324,823	110,001	87,798	113,452	679,063
13 Total support (Add lines 9, 10c, 11 and 12.)	18,624,766	21,883,747	27,305,563	26,311,308	22,934,080	117,059,464
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here	☐					

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	84.590 %
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	82.200 %

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	0.830 %
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	0.870 %
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	☐	
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	☐	
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions	☐	

Part IV

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

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
FRIENDS OF THE BRIDEGROOM

Employer identification number
74-2938033

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No	

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

1

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

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

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

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

4

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

5

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

☐ Yes ☐ No

6

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

7

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

8

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

☐ Yes ☐ No

9

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

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

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

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

► \$ _____

(ii) Assets included in Form 990, Part X

► \$ _____

2

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

a

Revenues included in Form 990, Part VIII, line 1

► \$ _____

b

Assets included in Form 990, Part X

► \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2011

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

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

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

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

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

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

(i)

unrelated organizations

(ii)

related organizations

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		4,988,639		4,988,639
b Buildings		22,025,544	3,743,192	18,282,352
c Leasehold improvements				
d Equipment		7,502,454	5,656,440	1,846,014
e Other		325,792		325,792
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				25,442,797

Schedule D (Form 990) 2011

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	20,096,652
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	19,865,303
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	231,349
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-5,600
9	Total adjustments (net) Add lines 4 - 8	9	-5,600
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	225,749

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements	1	22,672,499
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	22,672,499
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	-2,575,847
c	Add lines 4a and 4b	4c	-2,575,847
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	20,096,652

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	22,165,649
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	2,917,246
e	Add lines 2a through 2d	2e	2,917,246
3	Subtract line 2e from line 1	3	19,248,403
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	616,900
c	Add lines 4a and 4b	4c	616,900
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	19,865,303

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ORGANIZATION HAS ADOPTED THE PROVISIONS OF THE FASB ASC 740-10 AS IT MIGHT APPLY TO THE ORGANIZATION'S FINANCIAL TRANSACTIONS. THE ORGANIZATION'S POLICY IS TO RECORD A LIABILITY FOR ANY TAX POSITION THAT IS BENEFICIAL TO THE ORGANIZATION, INCLUDING ANY RELATED INTEREST AND PENALTIES, WHEN IT IS MORE LIKELY THAN NOT THE POSITION TAKEN BY MANAGEMENT WITH RESPECT TO THE TRANSACTION OR CLASS OF TRANSACTIONS WILL BE OVERTURNED BY A TAXING AUTHORITY UPON EXAMINATION. MANAGEMENT BELIEVES THERE ARE NO SUCH POSITIONS AS OF JUNE 30, 2012 AND, ACCORDINGLY, NO LIABILITY HAS BEEN ACCRUED.
PART XI, LINE 8 - OTHER ADJUSTMENTS		NONCASH DONATION -5,600
PART XII, LINE 4B - OTHER ADJUSTMENTS		RENTAL EXPENSES -807,783 COST OF GOODS SOLD - 2,109,463 REVENUE FROM WHOLLY OWNED DISREGARDED ENTITIES 108,962 NET LOSS FROM WHOLLY OWNED DISREGARDED ENTITIES 18,132 SCHOLARSHIPS 190,255 NONCASH DONATIONS 24,050
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSE 807,783 COST OF GOODS SOLD 2,109,463
PART XIII, LINE 4B - OTHER ADJUSTMENTS		EXPENSES FROM WHOLLY OWNED DISREGARDED ENTITIES 127,094 SCHOLARSHIPS 190,255 GRANT TO RELATED ENTITY 281,101 NONCASH GRANTS 18,450

Part II

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EAST ASIA AND THE PACIFIC	HUMANITARIAN WORK, MISSIONS	250,000	DIRECT WIRE			
			MIDDLE EAST AND NORTH AFRICA	HUMANITARIAN WORK, MISSIONS	12,000	CHECK			
			EAST ASIA AND THE PACIFIC -	HUMANITARIAN WORK, MISSIONS	17,500	CHECK			
			MIDDLE EAST AND NORTH AFRICA	HUMANITARIAN WORK, MISSIONS	36,000	CHECK			
			MIDDLE EAST AND NORTH AFRICA	HUMANITARIAN WORK, MISSIONS	155,996	CHECK			
			MIDDLE EAST AND NORTH AFRICA	HUMANITARIAN WORK, MISSIONS	101,600	CHECK			
			MIDDLE EAST AND NORTH AFRICA	HUMANITARIAN WORK, MISSIONS	5,000	CHECK			
			MIDDLE EAST AND NORTH AFRICA	HUMANITARIAN WORK, MISSIONS	77,600	CHECK			

2

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

3

Enter total number of other organizations or entities

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

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐ Yes ☒ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐ Yes ☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☐ Yes ☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☒ Yes ☐ No

Part V Supplemental Information

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

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

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

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
FRIENDS OF THE BRIDEGROOM

Employer identification number
74-2938033

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

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

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

14

3

Enter total number of other organizations listed in the line 1 table ▶

0

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) BENEVOLENCE	101	40,156			
(2) CHRISTIANS MISSIONS	3	50,675			
(3) COMMUNITY CARE	40		7,842		MEALS TO WIDOWS & ORPHANS
(4) COMMUNITY CARE	2340		58,715		MEALS TO HOMELESS, LOW INCOME FAMILIES
(5) SCHOLARSHIPS	114		190,255		TUITION REDUCTION SCHOLARSHIPS ARE GIVEN BASED ON SET CRITERIA
(6) COMMUNITY CARE	15		450		CHRISTMAS BOXES FOR THE POOR

Part IV

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

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

Software ID:

Software Version:

EIN: 74-2938033

Name: FRIENDS OF THE BRIDEGROOM

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FISHERS OF MEN MINISTRIES INTERNATIONALPO BOX 410953 MELBOURNE,FL 32941	59-2743310	501(C)(3)	5,000				CHRISTIAN MISSIONS
I2 MINISTRIES INC TOTALPO BOX 5284 LIGHTHOUSE POINTE,FL 33074	76-0800576	501(C)(3)	5,000				CHRISTIAN MISSIONS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DEEPER WATERS INC11520 GRANDVIEW RD KANSAS CITY, MO 64137	43-1719504	501(C)(3)	6,000				CHRISTIAN MISSIONS
FRONTIERSPO BOX 60730 PHOENIX, AZ 85082	95-3731505	501(C)(3)	6,000				CHRISTIAN MISSIONS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LIGHT TO THE NATIONS INC 3648 W PLAINS ROAD MASON, MI 48854	71-0580296	501(C)(3)	6,000				CHRISTIAN MISSIONS
CITYWIDE PRAYER MOVEMENTPO BOX 5277 KANSAS CITY, MO 64112	43-1763785	501(C)(3)	8,400				CHRISTIAN MISSIONS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RIVER OF REFUGE 5155 RAYTOWN RD SUITE 101 KANSAS CITY, MO 64133	27-0280023	501(C)(3)	10,000				CHRISTIAN MISSIONS
METRO INTERNATIONAL CHURCH 17 MENAHAN ST BROOKLYN, NY 11221	11-3382193	501(C)(3)	23,151				CHRISTIAN MISSIONS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EAGLES WINGSP BOX 450 CLARENCE, NY 14031	16-1462696	501(C)(3)	24,000				CHRISTIAN MISSIONS
INTERNATIONAL RECONCILIATION COALITIONPO BOX 3278 VENTURA, CA 93006	68-0031285	501(C)(3)	24,000				CHRISTIAN MISSIONS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YWAM CAMPAIGNS PO BOX 38 GRANDVIEW,MO 64030	41- 1719055	501(C)(3)	24,000				CHRISTIAN MISSIONS
PAUL CAIN MINISTRIES INC 3314 BRIDGE MANOR DRIVE KANSAS CITY,MO 64137	75- 2323156	501(C)(3)	35,000				CHRISTIAN MISSIONS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HELPING HANDS MINISTRIES INCPO BOX 337 TALLULAH FALLS, GA 30573	58-2266139	501(C)(3)	37,000				MEDICAL ASSISTANCE
INTERNATIONAL HOUSE OF PRAYER-FORERUNNER CHRISTIAN FELLOWSHIP3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137	45-2262183	501(C)(3)	281,101				CHRISTIAN MISSIONS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INTERNATIONAL HOUSE OF PRAYER 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137	74-2938029	501(C)(3)	9,700				CHRISTIAN MISSIONS

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
FRIENDS OF THE BRIDEGROOM

Employer identification number
74-2938033

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

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

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

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

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

Part II Loans to and/or From Interested Persons.

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

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

Part III Grants or Assistance Benefitting Interested Persons.

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

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

Part IV

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) JEFF WESTERGARD INC	OWNED BY OFFICER OF ORGANIZATION	19,559	CONSTRUCTION PROJECT MANAGEMENT FEES		No
(2) DIANE BICKLE	SPOUSE OF MICHAEL BICKLE, PRESIDENT	30,000	COMPENSATION PAID BY GLAD HEART, WHOLLY OWNED SUBSIDIARY		No
(3) HEARTLAND PROPERTY SOLUTIONS LLC	OWNED BY BOARD MEMBER OF EXODUS CRY (CONTROLLED BY FOTB UNTIL MAY 2012)	236,831	FEES PAID FOR CONSTRUCTION SERVICES (SEE PART VII, SECTION B OF FORM 990)		No
(4) GLADHEART INSURANCE INC	OWNED BY SON & DAUGHTER-IN-LAW OF PRESIDENT	21,436	REAL ESTATE COMMISSIONS PAID BY WHOLLY OWNED SUBSIDIARY, GLAD HEART REALTY		No

Part V

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

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2011

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

Name of the organization
FRIENDS OF THE BRIDEGROOM

Employer identification number
74-2938033

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art				
2 Art—Historical treasures	X	1	5,600	FAIR MARKET VALUE
3 Art—Fractional interests				
4 Books and publications	X		1,164	FAIR MARKET VALUE
5 Clothing and household goods	X		800	FAIR MARKET VALUE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	X	4	18,000	ESTIMATED VALUE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
CHRISTMAS BOXES FOR				
25 Other ► (POOR)	X	15	450	ESTIMATED VALUE
MISCELLANEOUS				
26 Other ► (ITEMS)	X	2	187	FAIR MARKET VALUE
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?

32a

No

b If "Yes," describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

Part III

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

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTORS	PART I, COLUMN (B)	THE NUMBER OF CONTRIBUTORS REPRESENTS THE NUMBER OF INDIVIDUALS OR ENTITIES THAT DONATED ITEMS

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ****Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.**
▶ **Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

2011**Open to Public
Inspection**Name of the organization
FRIENDS OF THE BRIDEGROOM**Employer identification number**

74-2938033

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	AN OFFICER OF THE ORGANIZATION REVIEWS THE RETURN EACH BOARD MEMBER RECEIVES A COPY OF THE RETURN TO REVIEW AND HAS OPPORTUNITY TO MAKE COMMENTS
	FORM 990, PART VI, SECTION B, LINE 12C	THE ORGANIZATION REQUIRES THAT ITS DIRECTORS AND OFFICERS ANNUALLY DISCLOSE ANY CONFLICTS OF INTEREST DIRECTORS ARE REQUIRED TO RECUSE THEMSELVES FROM ANY DISCUSSION AND DECISION MAKING RELATED TO CONFLICTS OF INTEREST
	FORM 990, PART VI, SECTION B, LINE 15	THE COMPLIANCE OFFICER GATHERS COMPARABLE COMPENSATION DATA FOR SIMILARLY QUALIFIED INDIVIDUALS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS THIS DATA IS PRESENTED TO THE COMPENSATION COMMITTEE THE COMPENSATION COMMITTEE THEN REVIEWS THE DATA AND MAKES SALARY RECOMMENDATIONS TO THE BOARD OF DIRECTORS THE BOARD OF DIRECTORS MAKES THE FINAL SALARY DETERMINATION OF ALL OFFICERS THE COMPENSATION COMMITTEE AND BOARD OF DIRECTORS DOCUMENT THE DECISION PROCESS IN MEETING MINUTES NO PERSON WITH A CONFLICT OF INTEREST IS ABLE TO PARTICIPATE IN ANY PART OF THE DELIBERATION OR DECISION MAKING PROCESS
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NONCASH DONATION -5,600 TOTAL TO FORM 990, PART XI, LINE 5 -5,600

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization FRIENDS OF THE BRIDEGROOM	Employer identification number 74-2938033
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Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) HANNAH'S DREAM ADOPTIONS LLC 3535 E RED BRIDGE RD KANSAS CITY, MO 64137 26-4290459	TO PROVIDE CHRISTIAN COUPLES ADOPTION SERVICES AT AN AFFORDABLE COST	MO	-18,132	17,176	FRIENDS OF THE BRIDEGROOM

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) INTERNATIONAL HOUSE OF PRAYER 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 74-2938029	TEACHING AND ENCOURAGING PEOPLE TO PRAY THROUGH PRAYER MEETINGS AND SEMINARS	MO	501(C)(3)	LINE 7	N/A		No
(2) SHILOH MINISTRIES INC 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 43-1859010	TO MINISTER TO CHRISTIAN CHURCH LEADERS THROUGH CHRISTIAN RETREATS/SEMINARS	MO	501(C)(3)	LINE 9	N/A		No
(3) EXODUS CRY INC 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 26-2317116	HUMAN TRAFFICKING AWARENESS (AS OF MAY 2012, NO LONGER A SUPPORTING ORG)	MO	501(C)(3)	LINE 11A, I	FRIENDS OF THE BRIDEGROOM	Yes	
(4) NEFARIOUS (DISREGARDED ENTITY OF EXODUS CRY) 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 45-1655899	FILM PRODUCTION (AS OF MAY 2012, NO LONGER A SUPPORTING ORGANIZATION)	MO	501(C)(3)	LINE 11A, I	FRIENDS OF THE BRIDEGROOM	Yes	
(5) INTERNATIONAL HOUSE OF PRAYER - FORERUNNER CHRISTIAN FELLOWSHIP 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 45-2262183	CHURCH	MO	501(C)(3)	LINE 1	N/A		No
(6) GRACE MINISTRIES INC 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 43-1432948	CHURCH	MO	501(C)(3)	LINE 1	N/A		No

Part III

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

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

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) GLAD HEART PROPERTIES INC 3435 E RED BRIDGE RD KANSAS CITY, MO 64137 91-2051891	REAL ESTATE AGENT	MO	FRIENDS OF THE BRIDEGROOM	C	93,680	162,541	100 000 %
(2) GLAD HEART STAFFING AGENCY INC 3435 E RED BRIDGE RD KANSAS CITY, MO 64137 45-3214388	STAFFING AGENCY	MO	FRIENDS OF THE BRIDEGROOM	C	-1,011	1,489	100 000 %

Part V

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

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Sale of assets to related organization(s)

g Purchase of assets from related organization(s)

h Exchange of assets with related organization(s)

i Lease of facilities, equipment, or other assets to related organization(s)

j Lease of facilities, equipment, or other assets from related organization(s)

k Performance of services or membership or fundraising solicitations for related organization(s)

l Performance of services or membership or fundraising solicitations by related organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n Sharing of paid employees with related organization(s)

o Reimbursement paid to related organization(s) for expenses

p Reimbursement paid by related organization(s) for expenses

q Other transfer of cash or property to related organization(s)

r Other transfer of cash or property from related organization(s)

Yes

No

1a Yes

1b Yes

1c Yes

1d

1e Yes

1f Yes

1g

1h

1i

1j

1k Yes

1l

1m

1n

1o Yes

1p

1q Yes

1r

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) GLAD HEART PROPERTIES	K	11,426	ACTUAL AMOUNT
(2) GLAD HEART PROPERTIES	A	39,600	ACTUAL AMOUNT
(3) GLAD HEART STAFFING AGENCY	K	717	ACTUAL AMOUNT
(4) GLAD HEART STAFFING AGENCY	A	140	ACTUAL AMOUNT
(5) GLAD HEART PROPERTIES	F	1,328	ACTUAL AMOUNT
(6)			

Schedule R (Form 990) 2011

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

[illegible]

Part VII

Supplemental Information

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

Identifier	Return Reference	Explanation	
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Software ID:
Software Version:
EIN: 74-2938033
Name: FRIENDS OF THE BRIDEGROOM

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

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c) (3))	(f) Direct Controlling Entity	(g) Section 512 (b)(13) controlled organization	
INTERNATIONAL HOUSE OF PRAYER 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 74-2938029	TEACHING AND ENCOURAGING PEOPLE TO PRAY THROUGH PRAYER MEETINGS AND SEMINARS	MO	501(C) (3)	LINE 7	N/A		No
SHILOH MINISTRIES INC 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 43-1859010	TO MINISTER TO CHRISTIAN CHURCH LEADERS THROUGH CHRISTIAN RETREATS/SEMINARS	MO	501(C) (3)	LINE 9	N/A		No
EXODUS CRY INC 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 26-2317116	HUMAN TRAFFICKING AWARENESS (AS OF MAY 2012, NO LONGER A SUPPORTING ORG)	MO	501(C) (3)	LINE 11A, I	FRIENDS OF THE BRIDEGROOM	Yes	
NEFARIOUS (DISREGARDED ENTITY OF EXODUS CRY) 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 45-1655899	FILM PRODUCTION (AS OF MAY 2012, NO LONGER A SUPPORTING ORGANIZATION)	MO	501(C) (3)	LINE 11A, I	FRIENDS OF THE BRIDEGROOM	Yes	
INTERNATIONAL HOUSE OF PRAYER - FORERUNNER CHRISTIAN FELLOWSHIP 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 45-2262183	CHURCH	MO	501(C) (3)	LINE 1	N/A		No
GRACE MINISTRIES INC 3535 E RED BRIDGE ROAD KANSAS CITY, MO 64137 43-1432948	CHURCH	MO	501(C) (3)	LINE 1	N/A		No