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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)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning and ending								
В	Check if	C Name of organization	D Employer identifie	cation number				
_	pplicabl	FACE (FOUNDATION FOR ADVANCEMENT	FACE (FOUNDATION FOR ADVANCEMENT					
	Addre chang	• <u>  OF</u> CHRISTIAN EDUCATION						
	Name Chang	Doing Business As	_	45-0338271				
	∏initiai return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe				
	Terminated	PO BOX 1432		(701	)252-1178			
	Amen return	City, town, or post office, state, and ZIP code	G Gross receipts \$	335,401.				
	Application	LOWING LOWN 'ND 20407-1427		H(a) Is this a group re				
	pendu	F Name and address of principal officer: JOAN MORRIS		for affiliates? Yes X No				
		, JAMESTOWN, ND 58401		H(b) Are all affiliates inc	luded? Yes No			
1.	Tax-ex	empt status: X 501(c)(3)	r 527		list. (see instructions)			
J	Nebsi	te: FACELEGACY.ORG		H(c) Group exemptio				
K	orm of	organization: X Corporation Trust Association Other	L Year	of formation: 1977 N	A State of legal domicile: ND			
	art I	Summary	-					
<b>a</b>	1	Briefly describe the organization's mission or most significant activities: PROVI	SION	OF EDUCATIO	NAL			
overnance		SUBSIDIES						
rna		Check this box large if the organization discontinued its operations or dispose	ed of more	than 25% of its net as	ssets.			
Š		Number of voting members of the governing body (Part VI, line 1a)			15			
್ತ್ರಾರ್		Number of independent voting members of the governing body (Part VI, line 1b)			15			
200 200 200 200 200 200 200 200 200 200		Total number of individuals employed in calendar year 2012 (Part V, line 2a)			0			
APR @ 2013 Activities & G		Total number of volunteers (estimate if necessary)			0			
eij Eij	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.				
<		Net unrelated business taxable income from Form 990-T, line 34			0.			
				Prior Year	Current Year			
	8	Contributions and grants (Part VIII, line 1h)		50,530.	130,086.			
폐ž		Program service revenue (Part VIII-line 2g)		0.	0.			
<b>38</b>		Investment income (Part VIII, column (A Jines 3, 4, and 7d)		49,487.	59,501.			
CANNED	11	Other revenue (Part VIII, column (A), lines 5, 80, 80/46 (10c, and 11e)		4,419.	4,114.			
Š		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		104,436.	193,701.			
(J)	13	Grants and similar amounts paid (ParAR, Rolumny (A), lines 1/38		67,076.	70,965.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)	· ···	0.	0.			
Ø		Salaries, other compensation, employee penetits (Pent IX, column (A), lines 5-10)		0.	0.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), the 11e)		0.	0.			
per		Total fundraising expenses (Part IX, column (D), line 25)	6.					
Ã		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		23,727.	24,923.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		90,803.	95,888.			
		Revenue less expenses. Subtract line 18 from line 12	·····	13,633.	97,813.			
es C	1.5	Trevende 1655 expenses, cabitact line to front line 12	Red	ginning of Current Year	End of Year			
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	1.00	1,469,066.	1,700,400.			
Ass	21	Total assets (Part X, line 16)  Total liabilities (Part X, line 26)	··· ·	0.	0.			
E et	22	Net assets or fund balances. Subtract line 21 from line 20	····	1,469,066.	1,700,400.			
	art II	Signature Block	:.:	1,400,0000	1,700,400.			
		Ities of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	ante and to the heet of m	v knowledge and helief it is			
		et, and complete. Declaration of preparer (other than officer) is based on all information of which			y kilowicoge alto belief, it is			
1100	, correc	Land complete becausion of preparer former than officer) is based on an information of which	cu hichaici	3/-/	1447			
Si.	_	Signature of officer		Date Date	3013			
Sig		JOAN MORRIS, PRESIDENT						
Her	e	Type or print name and title		<del></del>				
			10	ate Check	PTIN			
Paid	4		< /	3-15-13 If self-employe	<b>-</b>			
	parer	ROBERT A. PIATZ  Firm's name SCHAUER & ASSOCIATES, PC	3	Firm's EIN	P00036299 45-0350118			
	Only	Firm's address PO BOX 1808		FILITI S CIIV	#7-0220TTQ			
086	Only			Dhone no /	701\252_5422			
<u></u>	. Ale - "	JAMESTOWN, ND 58402-1808		Phone no. (	701)252-5422 X Yes ☐ No			
<u>ivia</u>	y ine li	RS discuss this return with the preparer shown above? (see instructions)	· · · · · · · · · · · · · · · · · · ·	<u> </u>	X Yes No			

# FACE (FOUNDATION FOR ADVANCEMENT OF CHRISTIAN EDUCATION 45-0338271 Page 2 Form 990 (2012) Part III | Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission: PROMOTION AND DEVELOPMENT OF EDUCATIONAL OPPORTUNITIES FOR STUDENTS OF ST JOHN'S ACADEMY 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. Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O. 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 are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 70,965. including grants of \$ 70,965.) (Revenue \$\_\_\_\_\_ (Code ) (Expenses \$ TUITION SUBSIDIES FOR PAROCHIAL EDUCATION (Code: \_\_\_\_\_\_) (Expenses \$\_\_\_\_\_\_\_\_including grants of \$\_\_\_\_\_\_\_) (Revenue \$\_\_\_\_\_\_

4d Other program services (Describe in Schedule O.)

) (Revenue \$

4e Total program service expenses ► 70,965.

including grants of \$

(Expenses \$

Form 990 (2012) OF CHRISTIAN EDUCATION
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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		<u> </u>
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		X
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		_X_
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		<u>X</u>
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		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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		_X_
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	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
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		<u>X</u>
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
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		<u>X</u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u>X</u>
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		<u>X</u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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 and XII is optional	12b		<u>X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	_13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
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			37
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			37
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		<u> X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			37
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	-	<u>X</u>
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		(0040)

Page 4

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

# FACE (FOUNDATION FOR ADVANCEMENT Form 990 (2012) OF CHRISTIAN EDUCATION Part V Statements Regarding Other IRS Filings and Tax Compliance

45-0338271 Page 5

Soliter the number reported in Box 3 of Form 1096. Enter 0-If not applicable 15 0 0 Enter the number of Forms W2G included in line 1a. Enter 0-If not applicable 150 0 150 0 0 150 0		Check if Schedule O contains a response to any question in this Part V			
1s Enter the number reported in Box 3 of Form 1096. Enter -0' in not applicable 15 0  Did Enter the number of Form W 250 chiculated in line 1s. Enter -0' in not applicable 15 0  Did the coganization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) within miner 2' 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			<u></u>	Yes	No
b Enter the number of Forms W26 included in line 1a. Enter O-If not applicable Old the organization comply with backup withholding rules for reportable payments to vendors and reportable gamming (gambling) winnings to prize winners?  2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements.  6a If all teast one is reported on line 2a, did the organization file all required federal employment tax returns?  2b If all teast one is reported on line 2a, did the organization file all required federal employment tax returns?  3b If the organization have unrelated business gross income of \$1,000 or more during the year?  3c If the organization have unrelated business gross income of \$1,000 or more during the year?  3d If "Yes," and a file of Form 900 Tof for the year If "No," provide an explanation in Schedule O  3b If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accountry?  4d A at any time during the catendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accountry.  4d B If "Yes," enter the name of the foreign country is PSee instructions for filing requirements for Form ID Fe0221, Report of Foreign Bank and Financial Accounts.  5d Was the organization a party to a prohibited tax shelter transaction?  5d Did any examination for filing requirements for Form ID Fe0221, Report of Foreign Bank and Financial Accounts.  5d View, "to line 5a of 5b, did the organization file Form 8888-17  5d Coses the organization shell examination file Form 8889 as restriction and party for prohibited star shelter transactions?  5d Did the organization shell examination shell examination file form 8690 as reported of the payor?  7a X  5d Did the organization shell examination shell examination file forms 8222 filed during the year  5d Did the organization shell examination foreign shell personal p	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) winnings to pitz we winners?  25 Effect the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, [12	_				
gambling) winnings to pirtae winners?  a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements.  filed for the calendar year ending with or within the year covered by this return.  b If a least one is reported on line 2a, did the organization file all required federal employment tax returns?  b If we sum of lines 1 and 2a is greater than 250, you may be required to e-file (see instructions)  b If "Yes," saw if filed a Form 990-To for this year If "No," provide an explanation in Sendeduce O  a A at any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b If "Yes," enter the name of the foreign country   ▶  See instructions for filing requirements for Form TD FOO221, Report of Foreign Bank and Financial Accounts.  was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a	С				
2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, fleed for the calendary sear ending with or within the year covered by this return  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)  3a Id the organization have unrelated business gross income of \$1,000 or more during the year?  3a At any time during the calendary year, did the organization fave an explanation in Schadule O  3b If "Yes," has if filed a Form 950-T for this year? If "No," provide an explanation in Schadule O  3b If "Yes," and the during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  4a X  b If "Yes," and the foreign country (such as a bank account, securities account, or other financial account)?  5b If "Yes," often the name of the foreign country.  5c Was the organization and the foreign country is a schadule or the country of the organization face of the organization that it was or is a party to a prohiblet dark and Financial Accounts.  6c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibile as charitable contributions.  6c If Yes, "Indicate the number of the organization file from 8868"?  6c If Yes, "Indicate the number of Forms 8202 filed during the year.  6c If Yes, "Indicate the number of Forms 8202 filed during the year.  6c If If Yes, "Indicate the number of Forms 8202 filed during the year.  6c If the organization received a contribution of qualified intellectual property, did the organization file Form 8990 as required?  6c If the organization received a contribution of a possible present of the organization. File Form 980, and the supporting			1c		
the for the calendary year endring with or within the year covered by this return    2a   0	2a				
b If a 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)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3b If "Yes," has it filed a Form 990-Tro this year? If "Yes," provide an explanation in Schedule O  3b If "Yes," has it filed a Form 990-Tro this year? If "Yes," provide an explanation in Schedule O  3b If "Yes," has it filed a Form 990-Tro this year? If "Yes," provide an explanation in Schedule O  3c At any time during the calendary year, cit the organization have an interest in, or a signature or other authority over, a financial account, in a foreign country (such as a bank account, securities account, or other financial account)?  4a X  5b If "Yes," there the name of the foreign country (such as a bank account, securities account, or other financial account)?  5c Us a Was the organization sparty to a prohibited tax shelter transaction at any time during the tax year?  5c Us a proper of Foreign Bank and Financial Accounts.  5c Us a proper of Foreign Bank and Financial Accounts.  5c Us a Was the organization sparty to a prohibited tax shelter transaction?  5c Us a proper of Foreign Bank and Financial Accounts.  5c Us a proper of Foreign Bank and Financial Accounts.  5c Us a proper of Foreign Bank and Financial Accounts.  5c Us a proper of Foreign Bank and Financial Accounts.  5c Us a proper of Foreign Bank and Financial Accounts.  5c Us a proper of Foreign Bank and Financial Accounts.  5c Us a proper of Foreign Bank and Financial Accounts.  5c Us a proper of Foreign Bank and Financial Accounts.  5c Us a proper of Foreign Bank and Financial Accounts.  5c Us a proper of Foreign Bank and Financial Accounts.  5c Us a proper of Foreign Bank and Financial Accounts.  5c Us a proper of Foreign Bank and Financial Accounts.  5c Us a proper of Foreign Bank and Financial Accounts.  5c Us a proper of Foreign B			`		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 Did the organization have unrestated business gross income of \$1,000 or more during the year? 4 At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly? 4 At a 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 to the sa bank account, securities account, or other financial accountly? 4 At a 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.  5 Bid Yes, "other the name of the foreign country.  5 See instructions for filing requirements for Foreign Bank and Financial Accounts.  5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5 Bid Yes, "did the use of the did not yet a party to a prohibited tax shelter transaction?  5 Bid Yes," bid in the sam of the did not yet any time during the tax year?  5 City of the second of the sam of the	b		2b		
b if "Yes," has if filed a Form 990T for this year? If "No," provide an explanation in Schedule O  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; leuch as a bank account, securities account, or other financial account?  **Yes," enter the name of the foreign country; leuch as a bank account, securities account, or other financial account?  **See instructions for filing requirements for Form TO F 90.22.1, Report of Foreign Bank and Financial Accounts.  **See instructions for filing requirements for Form TO F 90.22.1, Report of Foreign Bank and Financial Accounts.  **See instructions for filing requirements for Form TO F 90.22.1, Report of Foreign Bank and Financial Accounts.  **See instructions for filing requirements for Form TO F 90.22.1, Report of Foreign Bank and Financial Accounts.  **See instructions for filing requirements for Form TO F 90.22.1, Report of Foreign Bank and Financial Accounts.  **See instructions for filing requirements for Form TO F 90.22.1, Report of Foreign Bank and Financial Accounts.  **See instructions for filing requirements for Form TO F 90.22.1, Report of Foreign Bank and Financial Accounts.  **See instructions for filing requirements for Form Se866.7?  **See Instructions of Form Se866.7?  **See Instructions of Form Se866.7?  **Organization study filing for experiments for Form Se866.**  **Organization study device on that developed on the payor of the "Yes," filing f					
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account?)  See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts.  8 Was the organization party to a prohibited tax shelter transaction at any time during the tax year?  5 Was the organization that it was or is a party to a prohibited tax shelter transaction?  6 If Yes, "to line 5a or 5b, did the organization file Form 8886-17  6 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solect any contributions that were not tax deductible as charitable contributions?  6 If Yes, "did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that many receive deductible contributions under section 170(c).  8 If Yes," did the organization neceive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor?  8 If Yes," did the organization notity the donor of the value of the goods or services provided?  9 If Yes," indicate the number of Forms 8282 filed during the year  10 Id the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  10 If Yes," indicate the number of Forms 8282 filed during the year  11 If the organization receive any funds, directly or indirectly, or a personal benefit contract?  12 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-07  13 If the organization received a contribution of organization soft the supporting organization file a Form 1098-07  14 If the organization received a contribution of organization organizations. Did the supporting organization file organization seed truds and section \$9(a)(3)	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b   f "Yes," either 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?  5b   Did any stable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c   T'es," to line 5a or 5b, did the organization file Form 888617  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 as charitable contributions?  b   f "Yes," did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible?  7   Organizations that may receive deductible contributions under section 170(c).  a   Did the organization receive a payment in excess of \$75 made parity as a contribution and parity for goods and services provided to the payor?  7   Organizations that may receive deductible contributions under section 170(c).  a   If "Yes," fidic the organization notify the donor of the value of the goods or services provided?  7   Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8882?  7   Organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8882?  7   T'es," indicate the number of Forms 8282? filed during the year  9   Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7   Did the organization make any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7   Did the organization make any funds, directly or indirectly, to pay premiums organizations. Did the supporting organization service	b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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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?  Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?  Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  Section 501(c)(12) organizations. Enter:  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  12a  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  1 is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  4 Did the organization receive any payments for indoor tanning services during the tax year?  14a Did the organization receive any payments for indoor tanning services during the tax year?  14b  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	Ţ				
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b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			140		y
					- 42
	U	ii 165, nas it nied a Form 720 to report triese payments i 170, provide an explanation in Schedule O		990	(2012)

Form 990 (2012)

OF CHRISTIAN EDUCATION

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 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	···· ·		X
Sec	tion 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	5		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			-
b	Enter the number of voting members included in line 1a, above, who are independent	5		
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		X
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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a				
	more members of the governing body?	7a		X
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	х	
	Each committee with authority to act on behalf of the governing body?	8b		X
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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		-	
	tient 25 . The total films desired to teleposite information about policies not required by the internal nevertice dead.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	
b		110		
12a	Bild to the state of the state	12a	ł	X
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
·	In Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
	Did the process for determining compensation of the following persons include a review and approval by independent	14		
15				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			v
	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>
b	Other officers or key employees of the organization	15b		<u>X</u>
40	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			37
	taxable entity during the year?	16a		<u> X</u>
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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finan	cıal	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza MEGGEN HENKE - (701) 252-1178	tion: 🕨	·	
	P. O. BOX 1432, JAMESTOWN, ND 58402-1432			

orm 990 (2		CHRISTIAN		45-0338271
Part VII	Compensation of (	Officers, Directo	rs, Trustees, Key Employees	s, 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Name and Title	Average hours per week	(do	not c	ros	itior	1		I December			
	,	1 6		Position one than one			one	Reportable	Reportable	Estimated	
		offi	box, unless person is both an officer and a director/trustee)			ıs boti or/trus	h an tee)		compensation	amount of	
	(list any	-	1				, 	from the	from related organizations	other compensation	
	hours for	i ii	İ			2			(W-2/1099-MISC)	from the	
	related	ig i	ustee			ensat		(W-2/1099-MISC)	, ,	organization	
	organizations	i i	nal tr		loyee	Ecomp	l			and related	
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations	
(1) TIM KACHEL	0.00								_	_	
DIRECTOR		X	<u> </u>		<u> </u>	<u> </u>		0.	0.	0.	
(2) JAY SCHMITZ	0.00	┨									
DIRECTOR	1	X	_		_			0.	0.	0.	
(3) JOHN YATSKIS	0.00	<b> </b>			İ						
DIRECTOR		X	⊢		<u> </u>	<u> </u>		0.	0.	0.	
(4) DAVID BARNICK	0.00	<b>∤</b>			ĺ				•		
DIRECTOR		X	<u> </u>			-	<b></b>	0.	0.	0.	
(5) WALT NIELAND	0.00	<b> </b>							_		
DIRECTOR	0.00	X	┢	<u> </u>	<u> </u>	<del> </del>	-	0.	0.	0.	
(6) JERRY BERGQUIST	0.00								_	0	
DIRECTOR	0.00	X			_	<del> </del>		0.	0.	0.	
(7) BRENDA KIRKEBY	0.00	١,,							_		
DIRECTOR	0.00	X	-	-		┢	-	0.	0.	0.	
(8) TROY LEFEVRE	0.00	x						0.	0.	0.	
DIRECTOR	0.00	^				-		0.	0.	0.	
(9) DAN LISKO DIRECTOR	0.00	X						0.	0.	0.	
(10) MIKE WILLIAMS	0.00	<u>  ^``</u>				<del>                                     </del>		<b>.</b>			
DIRECTOR	0.00	x		ł				0.	0.	0.	
(11) BRION BITTNER	0.00										
DIRECTOR		x						0.	0.	0.	
(12) JOAN MORRIS	0.00										
PRESIDENT				Х				0.	0.	0.	
(13) MIKE SMYTH	0.00	]									
SECRETARY				X				0.	0.	0.	
(14) MEGHAN BRAUN	0.00	]									
TREASURER			L	X				0.	0.	0.	
(15) JAMES UKESTAD	0.00	]									
VICE PRESIDENT		<u> </u>	_	X	_		_	0.	0.	0.	
		1									
	<del> </del>	├-		-	-	_					
	<del></del>	1									

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Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization

Form 990 (2012) OF CHRISTIAN EDUCATION

Part VIII | Statement of Revenue

CHRISTIAN EDUCATION 45-0338271

	•	Check if Schedule O contains a response to any question II	n this Part VIII			
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
fts, Grants r Amounts	c b	Federated campaigns 1a  Membership dues 1b  Fundraising events 1c	-			
Contributions, Gifts, Grants and Other Similar Amounts	e f	Related organizations 1d 1e 1h 1h 1h 1h 1h 1h 1h 1h 1h 1h 1h 1h 1h			-	
aga	_	Noncash contributions included in lines 1a-1f: \$  Total. Add lines 1a-1f	130,086.			
	2 a	Business Code				
n Serv enue	c					
Program Service Revenue	d e					
۵		All other program service revenue				-
		Total, Add lines 2a-2f				
	3	Investment income (including dividends, interest, and other similar amounts)  Income from investment of tax-exempt bond proceeds	60,600.			60,600.
	5	Royalties				
		(i) Real (ii) Personal				1
		Gross rents				
	b	Less: rental expenses				
		Rental income or (loss)				
ł		Net rental income or (loss)				
	7 a	Gross amount from sales of (i) Securities (ii) Other	•			
		assets other than inventory 139, 423.	-			
	b	Less: cost or other basis				1
		and sales expenses				
		Gain or (loss) <1,099.>	1 000	1 000		Ì
		Net gain or (loss)	<1,099.	> <1,099.	<u>&gt;</u>	<del> </del>
Other Revenue	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See				
œ		Part IV, line 18 a 5 , 292 .				
흝	h	Less: direct expenses b 1,178.				
Ò		Net income or (loss) from fundraising events	4,114.			4,114.
l		Gross income from gaming activities. See	-,			
	-	Part IV, line 19 a	-			1
	b	Less: direct expenses b				
		Net income or (loss) from gaming activities			-	1
		Gross sales of inventory, less returns				
		and allowances a				
	b	Less: cost of goods soldb				
	С	Net income or (loss) from sales of inventory				
		Miscellaneous Revenue Business Code	,			, –
[	11 a					
	b					<u> </u>
	С					<b></b>
	d	All other revenue				<del> </del>
	е	Total. Add lines 11a-11d				<del> </del>
	12	Total revenue. See instructions.	193,701.	<1,099.	> 0	64,714.

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Form 990 (2012) OF CHRISTIAN EDUCATION

Part IX | Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must comp			omplete column (A).	
Δ	Check if Schedule O contains a respon	se to any question in the	IS Part IX	(C) I	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				-
	organizations in the United States. See Part IV, line 21	70,965.	70,965.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				·
5	Compensation of current officers, directors,				
	trustees, and key employees				
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	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
	Management	8,902.		8,902.	
b	Legal	0/3021		5/3021	<del> </del>
c	Accounting	2,100.		2,100.	
d	Lobbying	2/100.		2/1001	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	6,285.		6,285.	
q	Other. (If line 11g amount exceeds 10% of line 25,	0,205.		0,203.	
y	column (A) amount, list line 11g expenses on Sch O.)	1,416.			1,416.
10	Advertising and promotion	1,410.			1,410.
12		4,660.		4,660.	
13	Office expenses	4,000.		±,000.	<del></del>
14	Information technology				<del></del>
15	Royalties				
16	Occupancy				<del></del> ,
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	106		106	
19	Conferences, conventions, and meetings	186.		186.	
20	Interest				
21	Payments to affiliates	407.		407.	
22	Depreciation, depletion, and amortization	547.		547.	
23	Insurance	54/•		347.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)			-	
а					· · · · ·
b					
C					
d		400		400	
е	All other expenses	420.		420.	- A 44.0
25	Total functional expenses. Add lines 1 through 24e	95,888.	70,965.	23,507.	1,416.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)		ł	1	

Total liabilities and net assets/fund balances .

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Part X | Balance Sheet Check if Schedule O contains a response to any question in this Part X (A) Beginning of year End of year Cash - non-interest-bearing 1 Savings and temporary cash investments ..... 4,554 5.123. 2 2 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L Notes and loans receivable, net 7 Inventories for sale or use ..... 8 Prepaid expenses and deferred charges ..... 9 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . .... 2,386. 10a b Less: accumulated depreciation .. ..... ... \_10b 1,653. 1,140. 10c 1,246. 1,694,031. 1,462,859. Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 .............. 12 12 Investments · program-related. See Part IV, line 11 13 13 14 Intangible assets 14 Other assets. See Part IV, line 11 ...... 15 15 1,469,066 1,700,400. 16 Total assets. Add lines 1 through 15 (must equal line 34) ...... 16 Accounts payable and accrued expenses .... ..... 17 17 18 Grants payable .... 18 Deferred revenue ...... 19 19 Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties .... 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 25 0 0. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here \( \bigvee X \) and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 1,258,964. 1,376,582. Unrestricted net assets \_\_\_\_\_\_ 27 27 Temporarily restricted net assets ....... 28 210,102. 323,818. Permanently restricted net assets ..... 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund .... 31 Retained earnings, endowment, accumulated income, or other funds ....... 32 32

1,700,400.

1,469,066.

1,469,066.

33

34

33

	990 (2012) OF CHRISTIAN EDUCATION	<u>45-033</u>	<u>8271                                    </u>	Page	<u>12</u>
Pa	rt XI Reconciliation of Net Assets	_			_
	Check if Schedule O contains a response to any question in this Part XI			C	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	193	3,70	1.
2	Total expenses (must equal Part IX, column (A), line 25)	2	95	5,88	8.
3	Revenue less expenses. Subtract line 2 from line 1	3	97	7,81	3.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,469	,06	<del>6.</del>
5	Net unrealized gains (losses) on investments	5	133	3,52	<u>1.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	1,700	,40	0.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			<u></u> []	$\mathbf{x}$
				Yes N	No.
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.	1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X_</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	i on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b_	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:			- 1	
	X Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sır	ngle Audit			
	Act and OMB Circular A-133?		За	2	<u>X_</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit	1 T		·
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form 9	<b>990</b> (20	)12)

### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

FACE (FOUNDATION FOR ADVANCEMENT

Employer identification number

			STIAN EDUCAT						4	5-0338	3271	
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this par	t.) See ins	tructions.				
The organ 1	A church, co A school des A hospital or	nvention of churches scribed in section 17 a cooperative hospi	because it is: (For lines of some state of churk of the some state	ches desc hedule E.) described	ribed in se in section	ection 170 170(b)(1)	(b)(1)(A)(i (A)(iii).		i). Enter	the hospita	l's nam	ıe,
	city, and stat											
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.)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)  An organization that normally receives: (1) more than 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.)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  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											
e					-	_	-		-	-		n
_			han one or more publicly		_				(a)(1) or	section 509	(a)(2).	
f	_		ten determination from t		-	• • • • • • • • • • • • • • • • • • • •	•	e III				
_		rganization, check th										
g	_		organization accepted ar irectly controls, either al			•		• .		,	Yes	No
		-				="			-		163	140
	-		n described in (i) above?									-
	(iii) A 35% (	controlled entity of a	person described in (i) o	or (ii) above	∍?				•••••••	11g(iii)		
h			about the supported or									
	e of supported anization	(ii) EIN		(iv) Is the of in col. (i) list governing of Yes	sted in your	organizat	ion in col.	(vi) Is organizatio (i) organiza U.S.	n in col. I	(vii) Amount sup	of mor	netary
_											_	_
· <del>-</del> · · ·		_		-	<del></del>							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 OF CHRISTIAN EDUCATION

45-0338271 Page 2

Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support					-	
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	41,855.	51.002.	106,111.	55.421.	135,378.	389,767.
2	Tax revenues levied for the organ-		02/0020		30,122		
_	ization's benefit and either paid to						
	or expended on its behalf		i				
•	The value of services or facilities						
3							
	furnished by a governmental unit to						
	the organization without charge	41 055	F1 000	106 111	FF 401	135,378.	200 767
	Total. Add lines 1 through 3	41,855.	51,002.	106,111.	55,421.	135,3/6.	389,767.
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)	-					147,206.
	Public support. Subtract line 5 from line 4.		J	<u> </u>			242,561.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	41,855.	51,002.	106,111.	55,421.	135,378.	<u>389,767.</u>
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	49,286.	44,696.	47,390.	56,910.	60,600.	258,882.
9	Net income from unrelated business				•		
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
.0	or loss from the sale of capital					ļ	
	assets (Explain in Part IV.)						
44	Total support. Add lines 7 through 10						648,649.
	Gross receipts from related activities,	ete /eee instructio				12	040,047.
	First five years. If the Form 990 is for	•	,				<del></del> .
							<b>►</b> □
Sec	organization, check this box and storetion C. Computation of Publ	ic Support Per	rcentage				
	Public support percentage for 2012 (I					14	37.39 %
					1	15	37.39 % 28.61 %
	Public support percentage from 2011 33 1/3% support test - 2012. If the control of						
10a		•					x anu ▶X
	stop here. The organization qualifies						
D	33 1/3% support test - 2011. If the c						is box
	and stop here. The organization qual						▶□□
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac			•	· ·	-	. $\square$
	meets the "facts-and-circumstances"	_					
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the				•		. —
	organization meets the "facts-and-circ		=				
18	Private foundation. If the organization	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instruction	<u>▶</u>
					0-1	J. J. A /Faum 000	000 E71 0040

### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support	iow, piease com	piete Part II.)	<del></del>	<del></del>		
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and	(4) 2000	(3) 2003	10/2010	(0) 2011	16) 2012	II) IOIAI
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,				<del></del>		
merchandise sold or services per-						
formed, or facilities furnished in		1		1		
any activity that is related to the organization's tax-exempt purpose		1				
3 Gross receipts from activities that					<del>                                     </del>	
are not an unrelated trade or bus-		1				
iness under section 513		1				
4 Tax revenues levied for the organ-		<u> </u>		<del> </del>		
ization's benefit and either paid to						
or expended on its behalf		1				
5 The value of services or facilities						
furnished by a governmental unit to					1	
the organization without charge		1				
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons				<u></u>		
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support						
Calendar year (or fiscal year beginning in) 🕨 🔼	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6		ļ		ļ <u>-</u> -		
10a Gross income from interest, dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
b Unrelated business taxable income				1		
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business				1		
activities not included in line 10b, whether or not the business is				1		
regularly carried on						
12 Other income. Do not include gain						
or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12)		l		<u> </u>		
14 First five years. If the Form 990 is for t	he organization'	s fırst, second, thir	d, fourth, or fifth t	ax year as a secti	on 501(c)(3) organız	ation,
check this box and stop here	<u></u>		<del></del>	<del></del>		<b>&gt;</b> 🗀
Section C. Computation of Public					ГТ	
15 Public support percentage for 2012 (lin		-	column (f))		15	%
16 Public support percentage from 2011 Section D. Computation of Invest			······································	<del></del>	16	%
Section D. Computation of Invest					TT.	
17 Investment income percentage for 201					17	%
18 Investment income percentage from 20						9/
19a 33 1/3% support tests - 2012. If the c						/ is not
more than 33 1/3%, check this box and	•	-	•			▶∟_
b 33 1/3% support tests - 2011. If the o						
line 18 is not more than 33 1/3%, chec		•				▶⊨
20 Private foundation. If the organization	did not check a	box on line 14, 19	a, or 19b, check th	his box and see in	structions	▶∟

### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

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

2012 Open to Public Inspection

Name of the organization

FACE (FOUNDATION FOR ADVANCEMENT

Employer identification number 45-0338271

OF CHRISTIAN EDUCATION Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year ..... Aggregate contributions to (during year) ...... 2 Aggregate grants from (during year) Aggregate value at end of year .... ...... 4 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II. | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements ...... 2a b Total acreage restricted by conservation easements ...... 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register \_\_\_\_\_\_ Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? \_\_\_\_\_\_ Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ \_ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(l) and section 170(h)(4)(B)(ii)? \_\_\_\_\_\_ L In Part XIII, 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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 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 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 \_\_\_\_\_ \_\_\_ > \$\_\_\_\_\_\_ b Assets included in Form 990, Part X ..... 

		STIAN EDUCA		<del></del>		<u>-033827</u>		<u>age 2</u>
Par	t III   Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or Ot	her Similar <i>I</i>	Assets(contil	nued)	
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that are a	significant use	of its collectio	n item	s
	(check all that apply):							
а	Public exhibition	d	Loan or excl	hange programs				
b	Scholarly research	е	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co	llections and explain	how they further th	he organization's e	kempt purpose i	in Part XIII.		
5	During the year, did the organization solicit or	•	•	•				
-	to be sold to raise funds rather than to be ma					Yes		No
Par	t IV Escrow and Custodial Arrang							
	reported an amount on Form 990, Par							
1a	Is the organization an agent, trustee, custodia		iary for contribution	s or other assets n	ot included			
	on Form 990, Part X?					Yes		No
b	If "Yes," explain the arrangement in Part XIII a			•••• •••• •••				
-	, oc, oxplain the arrangement in tarying	complete in c	g		[ ]	Amoun	<u> </u>	
С	Beginning balance				1c		<u></u>	
	Additions during the year							
	Distributions during the year							
f	Ending balance							
	Did the organization include an amount on Fo					Yes		No
	If "Yes," explain the arrangement in Part XIII.					•••	<del></del>	וונ ו
Par						· · · · · · · · · · · · · · · · · · ·		<del>'</del>
	Zirasirinoite i ariasi complete ii	(a) Current year	(b) Prior year	(c) Two years back		hack (a) Four	Mare	hack
10	Reginning of year belongs				1		years	Uack
	Beginning of year balance	210,102,	180,971.	•	1	303.		
	Contributions	94,494.	28,197.	•	1	226.		
C	Net investment earnings, gains, and losses	24,514.	6,250.	· · ·	7	834.		
	Grants or scholarships	5,292.	5,316.	4,572	· 4·	572.		
е	Other expenditures for facilities					l		
	and programs						_	
f	Administrative expenses							
g	End of year balance		210,102.	•	.  143,	791.[		
2	Provide the estimated percentage of the curre	ent year end balance	e (line 1g, column (a	i)) held as:				
	Board designated or quasi-endowment		_%					
	Permanent endowment ► 100.00	%						
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c should	ld equal 100%.						
За	Are there endowment funds not in the posses	ssion of the organiza	tion that are held a	nd administered for	the organizatio	n r		
	by:						Yes	No
	(i) unrelated organizations			• • • • • • • • • • • • • • • • • • • •				_X_
	(ii) related organizations					3a(ii)	X	
b	If "Yes" to 3a(ii), are the related organizations					Зь	X	
4	Describe in Part XIII the intended uses of the							
Par	t VI Land, Buildings, and Equipm	ent. See Form 990,	Part X, line 10.					
	Description of property	(a) Cost or ot	her (b) Cost	or other (c)	Accumulated	(d) Bool	k value	•
		basis (investm	ent) basis (	(other) d	epreciation			
1a	Land							
	Buildings							
	Leasehold improvements							
	Equipment			2,386.	1,140		1,2	46.
	Other							
	Add lines 1s through 1e (Column (d) must ex		V column (P) line 1	0(c) )		Ť .	1 2	46.

Schedule D (Form 990) 2012 OF CHRISTIAN Part VII Investments - Other Securities. See	EDUCATION	40	5-0338271 Page 3
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-vear market value
(1) Financial derivatives	(D) Book Value	(c) Welfied of Valuation. Cost of C	market value
(2) Closely-held equity interests			
(3) Other			
(A)			-
(B)			
_(C)			
(D)			
(E)			
(G)			
(H)		<del></del>	
(1)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ► Part VIII Investments - Program Related. See		- 12	
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
(1)	(b) Book value	(e) meaned or valuation. Cook or c	The or your market raids
(2)			<del>-</del>
(3)			<del></del>
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, line 1	5. escription		(b) Book value
	escription		(b) DOOK Value
	······		<del>-                                     </del>
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line  Part X Other Liabilities. See Form 990, Part X, lir			<b>&gt;</b>
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(5)			•
(6)			
			-
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line			
2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text			

Part XI   Reconcilitation of Revenue per Audited Financial Statements With Revenue per Return   1   Total revenue, gains, and other support per audited financial statements   1   322,115.	Sche	dule D (Form 990) 2012 OF CHRISTIAN EDUCATION		_	45-0	0338271	Page 4
2 A Mounts included on line 1 but not on Form 990, Part VIII, line 12:  a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII) e Add lines 2 at through 2d 3 Subtract line 2 be from line 1 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 b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses and losses per audited in Form 990, Part VIII, line 7b 1 Total expenses and losses per audited in Form 990, Part VIII, line 12) 7 Amounts included on Form 990, Part VIII, line 7b 1 Total expenses and losses per audited in Form 990, Part VIII, line 12) 1 Total expenses and losses per audited in Form 990, Part VIII, line 12) 2 Amounts included on In Form 990, Part VIII, line 12.  1 Total expenses and losses per audited in Form 990, Part VIII, line 12. 2 Amounts included on In Form 990, Part VIII, line 25: a Donated services and use of facilities b Prior year adjustments 2 Deconated services and use of facilities c Other (Describe in Part XIII) 2 Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IV, line 25: b Other (Describe in Part XIII) 2 Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IV, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses, Add lines 3 and 4c, (This must equal Form 990, Part II, lines 1b and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part X, lines 2d and 4b, and Part XII, lines 2d and 4b, Also 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, lines 2d and 4b, and Part XII, lines 2d and 4b, Also complete this part to provide any additional information.  PART XI, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES	Par	t XI Reconciliation of Revenue per Audited Financial Statemen	nts With	Revenue per R	eturn		
a Net unrealized gains on investments b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII.) 2	1	Total revenue, gains, and other support per audited financial statements			1	322	,115.
b Donated services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII.) e Add lines 2a through 2d 2	2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				-	
c. Recoveries of prior year grants d Other (Describe in Part XIII.) 2	а	Net unrealized gains on investments	2a	133,521.			
d Other (Describe in Part XIII.)  e Add lines 2a through 2d  3 Subtract line 2e from line 1  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  b Other (Describe in Part XIII.)  c Add lines 4a and 4b  5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and uses of facilities  b Prior year adjustments  c Other (Describe in Part XIII.)  e Add lines 2a through 2d  3 Subtract line 2e from line 1  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not losses of losses on lost of Form 990, Part IX, line 25, but not on line 1:  a Investment expenses and olse of Form 990, Part IX, line 25, but not on line 1:  a Investment expenses and olse of Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part IX, line 27, Part IX, line 28 and 40, Secondary 1, Investment expenses not included on Form 990, Part IX, line 18.)  5 Total expenses Add lines 3 and 4c, (This must equal Form 990, Part IX, line 18.)  6 95, 888.  Part XIII Supplemental Information  Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1 and 4; Part IV, lines 1 b and 2b; Part IV, line 4; Part IX, lines 2d and 40, and Part XII, lines 2d and 40, Also complete this part to provide any additional information.  Complete this part to provide the descriptions required for Part III, lines 3, 5, and 9; Part III, lines 1 and 4; Part IV, lines 1 b and 2b; Part IV, line 4; Part IX, Lines 2d and 40, Also complete this par	b	Donated services and use of facilities	2b		]		
e Add lines 2a through 2d 3 Subtract line 2e from line 1 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 b Other (Describe in Part XIII) 1 Total expenses and losses per audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements With Expenses per Return 1 Total expenses and losses per audited financial statements With Expenses per Return 1 Total expenses and losses per audited financial statements With Expenses per Return 1 Total expenses and losses per audited financial statements With Expenses per Return 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 In 1,178. a In 1,178. b Other (Describe in Part XIII) c Add lines 4a and 4b 4c 6,285. b Total expenses not included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses in included on Form 990, Part IX, line 26, part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b c 6,285. b Total expenses. Add lines 3 and 4c, (This must equal Form 990, Part I, line 18) Fart XIII Supplemental Information Complete this part to provide the descriptions required for Part III, lines 3, 5, and 9, Part III, lines 1 and 4, Part IV, lines 1 b and 2b; Part V, line 4; Part X, line 2; Part X, lines 2 and 4b, and Part XII, lines 2 and 4b, Also complete this part to provide any additional information. PART XII, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES	С	Recoveries of prior year grants	2c		]		
3	d	Other (Describe in Part XIII.)	2d	1,178.			
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 6, 285. b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expense. Add lines 3 and 4e. (This must equal Form 990, Part II, line 12.) 5 193,701.    Part XII   Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 Investment expenses not included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VII, line 7b 4b 4c 6, 285. b Other (Describe in Part XIII) c Add lines 4a and 4b 4c 6, 285. b Total expenses. Add lines 3 and 4e. (This must equal Form 990, Part I, line 18.) c Add lines 4a and 4b b C 6, 285. b Total expenses. Add lines 3 and 4e. (This must equal Form 990, Part I, line 18.) c Total expenses. Add lines 3 and 4e. (This must equal Form 990, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part X, line 2; Part X, lines 2d and 4b. Also 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, line 2; Part X, lines 2d and 4b. Also complete this part to provide any additional information.  PART XII, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES	е	Add lines 2a through 2d			2e	<u>134</u>	<u>,699.</u>
a Investment expenses not included on Form 990, Part VIII, line 7b	3	Subtract line 2e from line 1			3	187	<u>,416.</u>
b Other (Describe in Part XIII.) c Add lines 4 and 4b 4c 6, 285. 5 Total revenue. Add lines 3 and 4e. (This must equal Form 990, Part I, line 12.) 5 193, 701.  Part XII   Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments 2 C C Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, fine 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4e. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4e. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4e. (This must equal Form 990, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part XIII. Supplemental Information  Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part IIII, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part X, line 25 and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART V, LINE 4: TO PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING ST  JOHN'S ACADEMY  PART XII, LINE 2D - OTHER ADJUSTMENTS:  PART XII, LINE 2D - OTHER ADJUSTMENTS:	4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
c Add lines 4a and 4b	а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	<u>6,285.</u>			
5 Total revenue. Add lines 3 and 4e. (This must equal Form 990, Part I, line 12)  Part XIII   Reconciliation of Expenses per Audited Financial Statements With Expenses per Return  1 Total expenses and loses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) s Add lines 2a through 2d 3 Subtract line 2e from line 1 3 1 1,178. a Investment expenses not 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 b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Part XIII   Supplemental Information  Complete this part to provide the descriptions required for Part III, lines 3a, 5, and 9; Part III, lines 1a and 4; Part IX, lines 1b and 2b; Part Y, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART V, LINE 4: TO PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING ST  JOHN'S ACADEMY  PART XII, LINE 2D - OTHER ADJUSTMENTS:  PART XII, LINE 2D - OTHER ADJUSTMENTS:	þ	Other (Describe in Part XIII.)	4b				
Part XII   Reconciliation of Expenses per Audited Financial Statements With Expenses per Return  1 Total expenses and losses per audited financial statements	C	Add lines 4a and 4b			4c		
1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 a Investment expenses not included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not 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 b Other (Describe in Part XIII.) c Add lines 4a and 4b c Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 Total expenses. Add lines 3 and 4c. (This must equal Form							<u>,701.</u>
2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	Pai	t XII   Reconciliation of Expenses per Audited Financial Stateme	nts Wit	h Expenses per	Retu		
a Donated services and use of facilities b Prior year adjustments 2b 2b 2c 3b 3c 3c 3c 3c 3c 3c 3c 3c 3c 3c 3c 3c 3c	1	Total expenses and losses per audited financial statements			1	90	<u>,781.</u>
b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 1 Negatiment expenses not 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 b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Part XIII Supplemental Information  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, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART V, LINE 4: TO PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING ST  JOHN'S ACADEMY  PART XII, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES	2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 Investment expenses not 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 b Other (Describe in Part XIII.) c Add lines 4a and 4b 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part II, line 18.)  Complete this part to provide the descriptions required for Part III, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART V, LINE 4: TO PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING ST  JOHN'S ACADEMY  PART XII, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES	а	Donated services and use of facilities	2a				
d Other (Describe in Part XIII.) e Add lines 2a through 2d 2	b	Prior year adjustments	2b				
e Add lines 2a through 2d 2e 1,178.  3 Subtract line 2e from line 1 3 89,603.  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 6,285. b Other (Describe in Part XIII) c Add lines 4a and 4b 4c (This must equal Form 990, Part I, line 18) 5 95,888.  Part XIII Supplemental Information 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, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART V, LINE 4: TO PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING ST  JOHN'S ACADEMY  PART XII, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES	C	Other losses	2c				
3 89,603.  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 b Other (Describe in Part XIII.) c Add lines 4a and 4b c Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  5 95,888.  Part XIII Supplemental Information  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 2; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART V, LINE 4: TO PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING ST  JOHN'S ACADEMY  PART XII, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES  PART XII, LINE 2D - OTHER ADJUSTMENTS:	d	Other (Describe in Part XIII.)	2d	1,178.	1 1		
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 6, 285. b Other (Describe in Part XIII.) c Add lines 4 and 4b 4c (This must equal Form 990, Part I, line 18.)  Part XIII   Supplemental Information  Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART V, LINE 4: TO PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING ST  JOHN'S ACADEMY  PART XI, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES  PART XII, LINE 2D - OTHER ADJUSTMENTS:	е	Add lines 2a through 2d			2e		
a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII.) c Add lines 4a and 4b c 6,285. 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Part XIII Supplemental Information  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, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART V, LINE 4: TO PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING ST  JOHN'S ACADEMY  PART XII, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES  PART XII, LINE 2D - OTHER ADJUSTMENTS:	3	Subtract line 2e from line 1			3	89	<u>,603.</u>
b Other (Describe in Part XIII.)  c Add lines 4a and 4b  5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  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, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART V, LINE 4: TO PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING ST  JOHN'S ACADEMY  PART XII, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES  PART XII, LINE 2D - OTHER ADJUSTMENTS:	4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
c Add lines 4a and 4b  5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  Part XIII Supplemental Information  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 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART V, LINE 4: TO PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING ST  JOHN'S ACADEMY  PART XII, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES  PART XII, LINE 2D - OTHER ADJUSTMENTS:	а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	6,285.			
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	b	Other (Describe in Part XIII.)	4b				
Part XIII Supplemental Information  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, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART V, LINE 4: TO PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING ST  JOHN'S ACADEMY  PART XI, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES  PART XII, LINE 2D - OTHER ADJUSTMENTS:	С	Add lines 4a and 4b			4c		
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, line 2; Part XI, lines 2d and 4b; Also complete this part to provide any additional information.  PART V, LINE 4: TO PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING ST  JOHN'S ACADEMY  PART XI, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES  PART XII, LINE 2D - OTHER ADJUSTMENTS:					5	<u> </u>	<u>.888.</u>
X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.  PART V, LINE 4: TO PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING ST  JOHN'S ACADEMY  PART XI, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES  PART XII, LINE 2D - OTHER ADJUSTMENTS:							
PART V, LINE 4: TO PROVIDE SCHOLARSHIPS FOR STUDENTS ATTENDING ST  JOHN'S ACADEMY  PART XI, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES  PART XII, LINE 2D - OTHER ADJUSTMENTS:						b; Part V, line	4; Part
JOHN'S ACADEMY  PART XI, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES  PART XII, LINE 2D - OTHER ADJUSTMENTS:				•			
PART XI, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES  PART XII, LINE 2D - OTHER ADJUSTMENTS:	PAI	RT V, LINE 4: TO PROVIDE SCHOLARSHIPS FOR S	TUDE	NTS ATTENDI	NG S	3T	
PART XI, LINE 2D - OTHER ADJUSTMENTS:  FUNDRAISING EXPENSES  PART XII, LINE 2D - OTHER ADJUSTMENTS:		mr.l.c.					
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	FIN	DRAISING EXPENSES					

Schedule D (Form 990) 2012

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection OMB No 1545-0047

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

Name of the organization FACE (FOU OF CHRIST	FACE (FOUNDATION FOR A OF CHRISTIAN EDUCATION	OR ADVANCEMENT	ENT				Employer identification number 45-0338271
Part I General Information on Grants and Assistance	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	to substantiate th	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	istance, and the select	
criteria used to award the grants or assistance?	stance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ocedures for moni	toring the use of grant	funds in the United				
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	Governments an	d Organizations in the	e United States. C	omplete if the orga	ınization answered "\	'es" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	\$5,000. Part II car	be duplicated if addit	ional space is need	led.			
1 (a) Name and address of organization or government	( <b>p</b> ) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST JOHN'S ACADEMY							
215 5TH ST SE JAMESTOWN, ND 58401	45-0235639	501 (C) 3	70,965	0			SCHOLARSHIPS AND TUITION SUBSIDIES
	and government or	ganizations listed in th					1
-1	s listed in the line	1 table					<b>A</b>
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	e, see the Instruct	ions for Form 990.					Schedule I (Form 990) (2012)

Page 2

45-0338271

Schedule | (Form 990) (2012)

Schedule | (Form 990) (2012)

OF CHRISTIAN EDUCATION

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.

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.

(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
					•
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	de the informatio	n required in Part I,	line 2, Part III, colum	(b), and any other additional inf	ormation.
SCHEDULE I, PART I, LINE 2: BOARD MEMB	ERS	ARE PART O	OF THE SELE	SELECTION	
COMMITTEE FOR THE SCHOLARSHIPS AND	THE	BALANCE OF THE	E FUNDS ARE	Е АТ ТНЕ	
DISCRETION OF ST. JOHN'S ACADEMY					
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		:			

232102 12-18-12

Schedule I (Form 990) (2012)

# SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Noncash Contributions**

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

FACE (FOUNDATION FOR ADVANCEMENT

OMB No 1545-0047

Employer identification number

Schedule M (Form 990) (2012)

2012

Open to Public Inspection

OF CHRISTIAN EDUCATION 45-0338271 Part I Types of Property (d) Check if Number of Noncash contribution Method of determining contributions or amounts reported on applicable noncash contribution amounts tems contributed Form 990, Part VIII, line 1g Art - Works of art Art - Historical treasures Art - Fractional interests ...... 3 Books and publications ..... Clothing and household goods ..... 5 Cars and other vehicles ...... 6 Boats and planes ..... 7 Intellectual property ............... 8 46,071. FAIR MARKET VALUE Securities - Publicly traded ..... 9 Securities · Closely held stock ..... 10 Securities · Partnership, LLC, or 11 trust interests ..... Securities · Miscellaneous ... ... ... 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution · Other 14 Real estate - Residential ...... 15 Real estate - Commercial ..... 16 Real estate · Other ..... 17 Collectibles ..... 18 Food inventory ..... 19 Drugs and medical supplies . . ... .......... 20 Taxidermy .... 21 Historical artifacts ..... 22 Scientific specimens ..... 23 Archeological artifacts ...... 24 25 Other -Other > 26 27 Other > Other -28 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 No Yes 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 Х 30a b If "Yes," describe the arrangement in Part II. X Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? 32a b If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

LHA

describe in Part II.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

## 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 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

FACE (FOUNDATION FOR ADVANCEMENT OF CHRISTIAN EDUCATION

 $\begin{array}{c} \text{Employer identification number} \\ 45-0338271 \end{array}$ 

FORM 990, PART VI, SECTION A, LINE 8B: NO MINUTES ARE KEPT BUT REPORTS ARE
PRESENTED TO THE FULL BOARD WHO MUST APPROVE THE ACTIONS OF THE COMMITTEE
FORM 990, PART VI, SECTION B, LINE 11: COPIES WERE REVIEWED WITH THE
FINANCE COMMITTEE IN DETAIL AND ADDITIONAL COPIES WERE AVAILABLE AT THE
ANNUAL MEETING FOR THE REST OF THE BOARD PRIOR TO FILING WITH THE IRS
FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST, COPIES ARE AVAILABLE
AT THE OFFICE OF THE ORGANIZATION
FORM 990, PAGE 12, PART XII, LINE 2C
NO CHANGE IN THE OVERSIGHT PROCESS OR SELECTION PROCESS

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Related Organizations and Unrelated Partnerships ► See separate instructions. FACE (FOUNDATION FOR ADVANCEMENT ► Attach to Form 990. OF CHRISTIAN EDUCATION Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Part

2012 Open to Public Inspection OMB No 1545-0047

\*

**Employer identification number** 45-0338271

Direct controlling

End-of-year assets <u>e</u>

Total income ਉ Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity

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

(a)	(p)	(9)	(p)	(9)	<b>(5)</b>	(6)	;
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	guillo	Section 512(P	oX13)
of related organization		foreign country)	section	status (if section	entity	entity?	
				501(c)(3))		Yes	N <sub>o</sub>
DIOCESE OF FARGO							
5201 BISHOPS BLVD S. SUITE A							
FARGO, ND 58104-7605		NORTH DAKOTA	501(C)(3)	LINE 1			W
						_	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2012

Schedule R (Form 990) 2012 OF CHRISTIAN EDUCATION

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

Page 2

45-0338271

⋖

General or Percentage managing ownership Schedule R (Form 990) 2012 (i) Section 512(b)(13) controlled entity? Yes No Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) ड Percentage ownership Yes Ξ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets ate allocations? Disproportion-Yes No Ξ Share of total income Share of end-of-year assets <u>6</u> Type of entity (C corp, S corp, or trust) Share of total income Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) ਉ **e** Legal domicile (state or foreign country) ত্ Direct controlling entity ত্ত Primary activity (c)
Legal
domicile
(state or
foreign Primary activity 9 Name, address, and EIN of related organization Name, address, and EIN of related organization 232162 12-10-12 Part IV

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# FACE (FOUNDATION FOR ADVANCEMENT

Schedule R (Form 990) 2012 OF CHRISTIAN EDUCATION

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

Schedule R (Form 990) 2012 No × × × × × × × × × × × × × × Yes Ę 5 <u>e</u> Ę 9 욘 19 <del>p</del> ę ပ္ 5 £ 13 Method of determining amount involved ¥ = Receipt of (i) Interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity Gift, grant, or capital contribution from related organization(s) Loans or loan guarantees by related organization(s) . ... . ... . ... ... ... ... Sale of assets to related organization(s) 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 d Loans or loan guarantees to or for related organization(s) 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? (c) Amount involved Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) ................. : Transaction Lease of facilities, equipment, or other assets to related organization(s) type (a-s) Performance of services or membership or fundraising solicitations for related organization(s) 3 Performance of services or membership or fundraising solicitations by related organization(s) Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. : Other transfer of cash or property from related organization(s) Sharing of paid employees with related organization(s) ... Gift, grant, or capital contribution to related organization(s) (a)
Name of other organization Dividends from related organization(s) ..... Purchase of assets from related organization(s) Exchange of assets with related organization(s) 232163 12-10-12 = Ε × \_ 8 Ξ 0 9 € 3 9

# FACE (FOUNDATION FOR ADVANCEMENT OF CHRISTIAN EDUCATION

Schedule R (Form 990) 2012

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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.

8	centage nership					
6	ral or Per aging ow ner?					
	General or Dearther?					
€	Cod of Sch (Forr					
3	느는 그는 그					
=	A Bloca	 				
(E)	Share of end-of-year assets					
9	Share of total income					
	S (2) S S				<u></u>	
ے اِ	partners sec 501(c)(3) orgs?					
estrierit partnersing (d)	Predominant income panters se (related, unrelated, 501(c)) excluded from tax unstructed section 512-514) Yes No					
Sion for certain inv	micile oreign ry)					
ruccions regarding exclusion	Primary activity					
that was not a related organization, see instructions regarding exclusion for certain investment partierships.  (a) (b) (c) (d)	Name, address, and EIN of entity					

Schedule R (Form 990) 2012

FACE (FOUNDATION FOR ADVANCEMENT 45-0338271 Page 5 Schedule R (Form 990) 2012 OF CHRISTIAN EDUCATION Part VII Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

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