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DCHÈDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2012

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Name of the organization
Timothy Two Assject International Employer Identification number 45 – 3052 440

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Par	tΙ	Réason f	or Public Cha	rity Status (All organ	nizations must co	omplete this par	t.) See instruction	ns		
e c	rgi	anization is not	a private founda	ition because it is. (For	lines 1 through 1	I, check only one	box.)			
1		A church, con-	vention of church	hes, or association of	churches describe	d in section 170(b)(1)(A)(i).			
2		A school desc	ribed in section	170(b)(1)(A)(ii). (Attacl	h Schedule E)					
3		A hospital or a	cooperative hos	spital service organiza	tion described in s	ection 170(b)(1)(A)(iii).			
4			earch organizatione, city, and state	on operated in conjunc e:	tion with a hospita	al described in se	ction 170(b)(1)(A)(i	iii). Enter	the	
5			on operated for () (1)(A)(iv). (Com	the benefit of a colleg	e or university ow	ned or operated	by a government	al unit de	scribe	d ii
6 7		An organizatio	n that normally	nment or governmenta receives a substantial (A)(vi). (Complete Part	part of its suppo			the gen	eral pu	ıblı
8		A community	trust described i	n section 170(b)(1)(A)	(vi). (Complete Par	rt II.)				
9	X	receipts from support from	activities related gross investme	receives: (1) more that d to its exempt function and income and unrelated unrelated the second of the second of the second of th	ons-subject to cated business tax	ertain exceptions able income (les	, and (2) no more is section 511 tax	than 33	1/3% o	fit
10		An organizatio	n organized and	operated exclusively	to test for public s	afety. See section	n 509(a)(4).			
11		purposes of o	ne or more pub	nd operated exclusive blicly supported organ describes the type of s	izations described	I in section 509(a)(1) or section 509	9(a)(2) Se	ry out ee sec	the tio
		a 🗌 Type I	b 🗋 Type	II c 🗌 Type III	-Functionally integ	grated d 🔲 1	Гуре III-Non-functi	onally int	egrate	d
е			ndation manage	that the organization in ers and other than one						
f		If the organization	ation received a	written determinatio	n from the IRS t	hatitis a Type	I, Type II, or Type	e III sup	porting	i
		•	check this box .							
9		Since August following pers		he organization accep	eted any gift or co	ntribution from a	ny of the			
		(i) A person v	who directly or i	ndirectly controls, eith	ner alone or togeth	er with persons	described in (ii) an	d	Yes	No
		(III) below,	the governing bo	ody of the supported o	organization?			11g(i)		
		(ii) A family m	ember of a perso	on described in (i) abo	ve?			11g(ii)		
		(iii) A 35% cor	ntrolled entity of	a person described in	(i) or (ii) above?			11g(iii)		
h		Provide the fo	llowing informati	on about the supporte	ed organization(s)					
(i)		ne of supported rganization	(li) EIN	(iii) Type of organization (described on lines 1-9	(iv) is the organization in col. (i) listed in your	(v) Did you notify the organization in	(vi) is the organization in col.	(vii) Amoun suj	t of monoport	etar

(i) Name of supported organization	(li) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) is the organization in col. (i) listed in your governing document?	(v) Dld you notify the organization in col (i) of your support?	(vi) is the organization in col. (i) organized in the US?		
		RECFIVE	- Yes . No	Yes No	Yes No		
(A)		FFD					
(B)		0.5	3 20 3		REC	EIVED	
(C)		IRS OG	DEN, U. AH		8	EIALD	
(D)					JAN 2	7 2014 0	
(E)					I. SGDE	N. UT	
Total	در فو د	10000000000000000000000000000000000000		· 新教教学 (1)	· · · · .		

	(Complete only if you checked the Part III If the organization fails to	he box on line o qu <u>alify unde</u>	e 5, 7, or 8 of er the tests lis	Part I or if the sted below, p	e organizatio lease comple	n failed to qua te Part III)	ality under	
Secti	on A. Public Support							
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")		,					
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3	770		A COLUMN TOWN				
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).					675 Set		
6	Public support. Subtract line 5 from line 4.		The state of the s	Marishar Co	21 11 = 4 = 1	, , , , , , , , , , , , , , , , , , , 		
6 Secti	on B. Total Support	A. ISPAN AN CARCAMAC		1,20		<u> </u>		
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
7	Amounts from line 4		12/23	(J/ == := :=		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
11	Total support. Add lines 7 through 10	4.30		Me Co	My to Step -	majed		
12	Gross receipts from related activities, etc	c. (see instructi	ons) .		•	12		
13	First five years. If the Form 990 is for the					ear as a sectio	ก 501(c)(3)	
	organization, check this box and stop he		<u> </u>	<u> </u>	<u> </u>	· · · · ·	<u> </u>	
Secti	on C. Computation of Public Suppo					, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
14	Public support percentage for 2012 (line		•	• • • •		14		%
15	Public support percentage from 2011 Sc					15	la a la Abia	%
16a	331/3% support test—2012. If the organi box and stop here. The organization qua	ization did not	cneck the box	on line 13, and	d line 14 is 33	73% or more, c	neck this	_
L.								
b	331/a% support test—2011. If the organ check this box and stop here. The organ					15 15 331/3%	or more, ▶	
17a	10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.							
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organizate explain in Part IV how the organization in supported organization.	ition meets the neets the "fact	e "facts-and-ci s-and-circums	rcumstances" tances" test T	test, check th	ns box and ste	op here.	
40	• • •			40- 40- 47-			. •	
18	Private foundation. If the organization d	ia not check a	box on line 13	, 16a, 16b, 17a	1, or 1/b, chec	K this box and	ş ee ▶	_

Schedu	le A (Form 990 or 990-EZ) 2012						Page
Part	Support Schedule for Organiza (Complete only if you checked the If the organization fails to qualify	ne box on line	e 9 of Part I o	or if the organ	ization failed		
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					16448	16448
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose					0	0
3	Gross receipts from activities that are not an unrelated trade or business under section 513					0	0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					0	0
5	The value of services or facilities furnished by a governmental unit to the organization without charge	-				0.	0
6	Total. Add lines 1 through 5 .			-		16448	16448
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons					0	0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year					0	6
c	Add lines 7a and 7b			 		0	0
8	Public support (Subtract line 7c from line 6.)	-1/1		原理	经 销量		16448
Secti	on B. Total Support						
Caler	idar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6			<u> </u>	L	16448	16448
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.					0	0
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.					0	0
С	Add lines 10a and 10b			f		0	0
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on					0	0
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)					D	0
13	Total support. (Add lines 9, 10c, 11, and 12)					16448	16448

13	and 12)	16448	16448
	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year organization, check this box and stop here	ras a sectio	n 501(c)(3) ▶ 🔀
Section	on C. Computation of Public Support Percentage		
15	Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)	15	%
16 _	Public support percentage from 2011 Schedule A, Part III, line 15	16	%
Section	on D. Computation of Investment Income Percentage		
17	Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)	17	%
18	Investment income percentage from 2011 Schedule A, Part III, line 17	18	%
19a	331/3% support tests-2012. If the organization did not check the box on line 14, and line 15 is mo	re than 331/39	6, and line
	17 is not more than 331/2%, check this box and stop here. The organization qualifies as a publicly support	ted organizatı	on 🕨 🔲
b	331/2% support tests-2011. If the organization did not check a box on line 14 or line 19a, and line 16 i	s more than 3	131/3%, and
	line 18 is not more than 331/2%, check this box and stop here. The organization qualifies as a publicly suj	ported organ	ization 🕨 🗌
	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box a		

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See	Page 4
	instructions).	
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TIMOTHY TWO PROJECT INTERNATIONAL CAPE FEAR SCHOOL OF DISCIPLESHIP % ANTHONY REGISTER PO BOX 7889 WILMINGTON NC 28406



039527

DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of officer or trustee

1-23-2014

Date

TREASURER

Title