

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Inspection

Department of the Treasury

▶ The organization may have to use a copy of this return to satisfy state reporting requirements internal Revenue Service For the 2012 calendar year, or tax year beginning and ending D Employer identification number C Name of organization GLOBAL MINISTRIES FOUNDATION Check if applicable Doing Business As Address change 56-2378045 Number and street (or PO box if mail is not delivered to street address) Room/suite Telephone number Name change Initial return O BOX 1150 901-684-5556 City, town or post office, state, and ZIP code Terminated X Amended return CORDOVA ΤN 38088 G Gross receipts \$ 6 341 282 Yes X No F Name and address of principal officer H(a) Is this a group return for affiliates? Application pending Richard Hamlet P O Box 1150, Cordova, TN 38088 H(b) Are all affiliates included? If "No," attach a list (see instructions) X 501(c)(3) 501(c) (4947(a)(1) or 527 Tax-exempt status) < (insert no) Website: ▶ www GMFonline org H(c) Group exemption number ▶ X Corporation L Year of formation M State of legal domicile K Form of organization Trust Association Other > 2003 TN Part I Summarv Briefly describe the organization's mission or most significant activities Charitable financial mission support, mobilization of volunteers and administration oversight of all charitable relief and Activities & Governance development projects around the world Check this box | If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 2 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 14 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** Contributions and grants (Part Williams) 4.441.918 5.662.366 Program service revenue (Part VIII, line 2g) Investment income (Part VIII) column (A) lines 5, 4, and 7d)
Other revenue (Part VIII) column (A), lines 5, 6d ac, 9c, 10c, and 11e) 678,916 240.273 10 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 6,341,282 12 4,682,191 Grants and similar amounts paid (Pactix) column (A), lines 1-3) 1,948,726 1,471,057 13 14 Benefits paid to or for members (Part IX, column (A), line 4) 796,250 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 639,078 15 Professional fundraising fees (Part IX, column (A), line 11e) 16a 金龙 Total fundraising expenses (Part IX, column (D), line 25) ▶ b 17 429,957 Other expenses (Part IX column (A), lines 11a-11d, 11f-24e) 514,813 2,697,264 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 3,102,617 19 Revenue less expenses Subtract line 18 from line 12 1,579,574 3.644.018 **Beginning of Current Year End of Year** 3,601,226 20 Total assets (Part X, line 16) 6,870,721 21 Total liabilities (Part X, line 26) 2.437.943 2.063,420 1,163,283 4,807,301 Net assets or fund balances Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete eration of preparer (other than officer) is based on ail information of which preparer has any knowledge Sign Here Richard Hamlet, President Type or print name and title Print/Type preparer's name signature Date Prepared Paid RICHARD L ARMOUR 4/22/2015 self-employed P01238827 **Preparer** Firm's name PRICHARD L ARMOUR, OPA Firm's EIN ► 62-1090061 Use Only Firm's address ▶ 2794 BARTLETT BLVD, BARTLETT, TN 38134 901-385-1944 Phone no

Yes

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.

Pa	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III		_
1	Briefly describe the organization's mission		
	Advance the gospel in great commission work around the globe. To provide low to moderate		. .
	income housing nationwide as part of the parent's charitable outreach/social services plan		
			- -
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes X N	Ю
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	Yes X N	10
4	If "Yes," describe these changes on Schedule O	sourced by	
4	Describe the organization's program service accomplishments for each of its three largest program services, as me expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation		
	the total expenses, and revenue, if any, for each program service reported	s to others,	
	the total expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 2,210,696 including grants of \$) (Revenue \$		_
-7 a	NAME of the control o		
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)	
			- .
			- -
			. -
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)	
4-1	Other program convices (Decembe in Schedule O.)		
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$	1	
An	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ► 2,210,696		
4e_	rotal program service expenses - £,£ (0,000		

Part IV Checklist of Required Schedules

			res	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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		
		-		
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,	li		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
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
0	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,	* .	a K	
	VII, VIII, IX, or X as applicable	2	أكنك	***
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		Х
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		X
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		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	_X	<u> </u>
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			. <i>.</i>
	Schedule D, Parts XI and XII	12a		<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	ا ء. ا		
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	X
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	146		🗸
ı E	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	- '-	 ^	\vdash
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15.000 of expenses for professional fundraising services			 ^` -
• •	on Part IX, column (A), lines 6 and 11e? If "Yes." complete Schedule G, Part I (see instructions)	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<u> </u>		
. •	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		_x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
-	If "Yes," complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 9	990 (2012) GLOBAL MINISTRIES FOUNDATION	56-2378045	Р	age 4
Part	Checklist of Required Schedules (continued)			
			Yes	No
21	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	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III .	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
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			۱.,
	24b through 24d and complete Schedule K If "No," go to line 25	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		├
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			1
_	to defease any tax-exempt bonds?	. 24c		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		├
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			١.,
_	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	ļ	X.
þ	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	256		
	990-EZ? If "Yes," complete Schedule L, Part I	. 25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or a substantial assessment of the compensate of the			
0 7	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part	// <u>26</u>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			1
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	ς <u>λ</u> ,	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		i Alle	
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	28a		X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	204		┝
b	Schedule L, Part IV	28b	х	l
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
•	conservation contributions? If "Yes," complete Schedule M	. 30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32	ĺ	x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I.	33	<u>L_</u>	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1	. 34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled	t l		
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	. 35b	X	

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part*

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and

organization? If "Yes," complete Schedule R, Part V, line 2

19? Note. All Form 990 filers are required to complete Schedule O

36

37

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . 1a 30	4	Yes	No
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	×.	- ,	ĺ
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	` <i>:</i> #•		,
C	gaming (gambling) winnings to prize winners?	1c	X	İ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	13	,	12
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 14	أمند		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		<u></u>	Ĺ_
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			l
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			V
	account)? .	4a	۷., ۶	X
b	If "Yes," enter the name of the foreign country	***		
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
5а b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	-	x
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		Ĥ
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?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	1187 1		š
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	all to	***	2
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.		x
	required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 7d	7c		<u>^</u>
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	* 35	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	~~~		
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	\$¥ 	* ?	
а	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	. 2	_
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII. line 12	, ·	~~	
a b	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	,′ *		
11	Section 501(c)(12) organizations. Enter	. 1	, ,	\ ' <i>"</i> '
'' a	Gross income from members or shareholders . 11a			4 U
b	Gross income from other sources (Do not net amounts due or paid to other sources	(# 13 	3277	1 **
-	against amounts due or received from them)	િંગ્રેટ્ડ પ્રમુજ	8-25 8-25	.*
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]	7 20	¥3.36	i,
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		* ***	Ŀ
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	ļ	<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O	3.5	by .	ľ
þ	Enter the amount of reserves the organization is required to maintain by the states in which		铁铁	`
	the organization is licensed to issue qualified health plans 13b	<i>:•••</i>	: · ·	
C	Enter the amount of reserves on hand Did the assessment are received any payments for indeer tenning convices during the tay year?	145	-	X
14a	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a		├^

Part VI

Coot	ion A. Coverning Body and Management	<u>-</u>			
secu	ion A. Governing Body and Management			Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year	1a	3		05337
ıa	If there are material differences in voting rights among members of the governing body, or	ıa			# 3
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O			*	-
	· •	1h		40	S.
b	Enter the number of voting members included in line 1a, above, who are independent	1b	4	30	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	mp with		1000	A-3-42-11
_	any other officer, director, trustee, or key employee?		2		<u>X</u> _
3	Did the organization delegate control over management duties customarily performed by or under				V
	supervision of officers, directors, or trustees, or key employees to a management company or othe		3_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was		4		
5	Did the organization become aware during the year of a significant diversion of the organization's a	issets.	5		X
6	Did the organization have members or stockholders?		6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or	appoint	1_	.,	
	one or more members of the governing body?		7a	_X	
þ	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 undertake	n during	20	. Y (X)	X
	the year by the following			Test 2	Are is:
а	The governing body?	•	8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-	eached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		<u> </u>
<u>Sect</u>	ion B. Policies (This Section B requests information about policies not required by the	<u>Internal Revenue</u>	Code		
			10	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	L 4	10a		_X_
b	If "Yes," did the organization have written policies and procedures governing the activities of such		405		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	re filing the form?.	11a	X	200 SEC
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		***		**
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	-1	12a	X	<u> </u>
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could		12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	168,	425	V	
	describe in Schedule O how this was done .	-	12c	X	
13	Did the organization have a written whistleblower policy?		14	X	
14	Did the organization have a written document retention and destruction policy?	يط امير		^	200
15	Did the process for determining compensation of the following persons include a review and appro-				Pi y
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	and decision?	450		
a	The organization's CEO, Executive Director, or top management official	•	15a	X	\vdash
р	Other officers or key employees of the organization		15b	X	2 3 1
40.	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		19.25		Same of Same
168	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements assets to a participate in a joint venture or similar arrangements.	ement	40-		Sec. 27-1
	with a taxable entity during the year?	-4- 4-	16a	~ <u>~~</u> ~~	X Test
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the state of th				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safe	guaro	466	****	
	the organization's exempt status with respect to such arrangements?		16b	L	<u> </u>
	Let the states with which a copy of this Form 900 is required to be filed.				
17 18	List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 99	0-T (Section 501/c)/	3)s only	رر ار	
18	available for public inspection. Indicate how you made these available. Check all that apply		ojo orii;	, ,	
		plain in Schedule O)		
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents,		,		
	policy, and financial 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			
	organization Richard Hamlet	901-684-5	556		
	65 Germantown Court #409, Cordova, TN 38018				

70045		
'8045	Page	ı

_	_		
Form	990	(201	i2)

GLOBAL MINISTRIES FOUNDATION

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

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

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line) (B) Average hours per week (list any hours for related organizations below dotted line) (do not check more than one box, unless person is both an officer and a director/trustee) or director (do not check more than one box, unless person is both an officer and a director/trustee) or director (to not check more than one box, unless person is both an officer and a director/trustee) or director (to not check more than one box, unless person is both an officer and a director/trustee) or director (to not check more than one box, unless person is both an officer and a director/trustee) or director than one box, unless person is both an officer and a director/trustee) or director than one box, unless person is both an officer and a director/trustee) or director than one box, unless person is both an officer and a director/trustee) or director than one box, unless person is both an officer and a director/trustee) or director than one box, unless person is both an officer and a director/trustee) or director than one box, unless person is both an officer and a director/trustee) or director than one box, unless person is both an officer and a director/trustee) or director than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations					
(A) Dishard Hamlet	40 00		<u> </u>	<u> </u>		8.				
(1) Richard Hamlet President & Chairman	20 00	v		X	x	х		374,445		
(2) Alex Conferred	1 00	_	┢╌	┝	 ^	_		374,443		
(2) Aian Swaπord Director	1 00	i e		-						
(3) Thomas Stovall	1 00		┢	<u> </u>						
Director	1 00									
(4) Nancy Hall	40 00									
Treasurer	10 00	1		X				45,000		
(5) Natalie Metcalf	40 00									
Secretary	1 00			X				26,000		
(6) Jimmy Ervin	40 00									
Key Employee				<u> </u>	Х			40,000		
(7)										
(8)						-				
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part VII Section A. Officers, Directors, Tru (A) Name and title		(B) Average hours per week (list any	(do r box, office	(C) Position (do not check more than or box, unless person is both a officer and a director/truste					(D) Reportable compensation from	(E) Reportable compensation from related	E	(F) stimate mount o	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	or ar	npensar from the ganizati nd relate janizatio	e on ed
(15)													
(16)													
(17)											-		
(18)													
(19)						-						 	
(20)													
(21)			-										
(22)					-						_		
(23)							-			,	_		
(24)													
(25)													
1b c	Sub-total Total from continuation sheets to Part VII, So	ection A	<u> </u>		•	L		>	485,445				
d 	Total (add lines 1b and 1c) Total number of individuals (including but not lin	nited to those lis	sted a	bov	e) v	vho	recei	<u>►</u> ved	485,445 I more than \$100	,000 of	<u> </u>		
	reportable compensation from the organization	>			1							Yes	No
3	Did the organization list any former officer, dire employee on line 1a? <i>If "Yes," complete Sched</i>				oye	e, o	r high	nesi	t compensated		3	à	X
4	For any individual listed on line 1a, is the sum of	of reportable con	npens	satio					•	•			\$ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	the organization and related organizations grea	iter than \$150,00	30? I I	' "Υ <i>ϵ</i>	es, "	con	ipiete	Sc	chedule J for sucl	7	4		X
5	Did any person listed on line 1a receive or accr for services rendered to the organization? If "Ye									ridual	5)	پر کر و کر کر و X
Sec	tion B. Independent Contractors												
1	Complete this table for your five highest compecompensation from the organization Report coyear										tax		
	(A) Name and business add	ress							(B) Description of serv	/ices	(C Compe		
													١
2	Total number of independent contractors (inclu-		ed to	tho	se I	ıste	d abo	ve)	who received		*	'\ \	140

Part	VIII	Statement of Revenue Check if Schedule O contains	s a response to	any question in th	ns Part VIII		,	
· · · ·		\$		x /	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
g g	1a	Federated campaigns	1	а	۵,	,		
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1					
S, G	С	Fundraising events	1					
Contributions, Gifts, and Other Similar Ar	d	Related organizations	-	d 3,750,000	ş	*		`
Sim	е	Government grants (contribution	· —	e	1 1/4 1/51	, \$	~ * .	₹
ig ig	f	All other contributions, gifts, gran		4 040 000		· ·		
풀립	_	similar amounts not included about the Noncash contributions included in l		f1,912,366		,	Ì	2 31° x
S E	g h	Total. Add lines 1a–1f	iiies ia-ii - 3	▶	5,662,366			
		Total. Add lines 1a-11		Business Code	*	, ž		
Program Service Revenue	2a							
الأه	b							<u> </u>
Š	С							<u> </u>
Ser	d							
E	е							
ğ	f	All other program service revenu	ie			3 ,		- ,5 ,6 ,
	<u>g</u> 3	Total. Add lines 2a–2f Investment income (including div	vidends interes			6 , ,		<u> </u>
		other similar amounts)	viderius, interet	> t, and >	. 678,916			
	4	Income from investment of tax-e	xempt bond pr	oceeds ►				'
	5	Royalties		•				
		•	(ı) Real	(ii) Personal		* \	* 3,	
	6a	Gross rents				* · · · · · · · · · · · · · · · · · · ·	1 1 1 1 1 1 1 1 1 1	
	b	Less rental expenses			National Control of the Control of t			524 6 4
	С	Rental income or (loss)			- 4	, , , , , , , , , , , , , , , , , , ,		daniel de la companya della companya
	d	Net rental income or (loss)		N		<u></u>	<u> </u>	
	7a	Gross amount from sales of	(i) Securities	(#) Other		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	1 th
		assets other than inventory			, \$1 . v	ه ۱ ۱	a , * ,	1, , ,
	þ	Less cost or other basis			* ,	· ·	, , ,	
		and sales expenses				-		1 ,
	C	Gain or (loss)	L					
	d	Net gain or (loss)	•	>		 		<u> </u>
o l	0.	Cross income from fundraising						
חבי	8a	Gross income from fundraising events (not including \$			100			
3V 6		of contributions reported on line	10)				* * * * * * * * * * * * * * * * * * * *	1 "
Ř		See Part IV, line 18	•	a) ' \	311	a a sure substitution of	Maria Santa Sa
Other Revenue	b	Less direct expenses		b				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ō		Net income or (loss) from fundra	alsina events	>				
		Gross income from gaming activ			,			* 2,"
		See Part IV, line 19 .	•	a				1
	b	Less direct expenses	. 1	b	1	, , , , , , , , , , , , , , , , , , ,	1	
	С	Net income or (loss) from gamin	ig activities	>			<u> </u>	
	10a	Gross sales of inventory, less					1	
		returns and allowances	;	a		, ,		
	b	Less cost of goods sold		b				
	С	Net income or (loss) from sales	of inventory	<u> </u>				<u> </u>
	, .	Miscellaneous Revenue		Business Code	ļ	ļ	ļ	
	11a				ļ	 -	 	
	b				 	 	 	 -
	C	All other revenue				 	 	-
	d	All other revenue	•		 			
	42°	Total. Add lines 11a-11d			6,341,282			
	12	Total revenue. See instructions			0,041,202	·L	1	_1

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must complete all			omplete column (A)	
	Check if Schedule O contains a response to any				<u></u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21	378,550	378,550	*****	
2	Grants and other assistance to individuals in the				Sec. 48
	United States See Part IV, line 22 .	319,439	319,439		
3	Grants and other assistance to governments,				1000
	organizations, and individuals outside the				
_	United States See Part IV, lines 15 and 16	773,068	773,068		* * * * * * * * * * * * * * * * * * * *
4	Benefits paid to or for members			\$ * * * * * , /	<u> </u>
5	Compensation of current officers, directors,	105 115	105 115		
	trustees, and key employees	485,445	485,445		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B) Other salaries and wages	279,250	53,089	200,161	· · · ·
7	Pension plan accruals and contributions (include	219,230	33,003	200,101	
8	·				
9	section 401(k) and 403(b) employer contributions) Other employee benefits	57,555	23,655	33,900	
10	Payroll taxes	37,333	20,000	33,300	
11	Fees for services (non-employees)		·		
···	Management .				
b	Legal .				
C	Accounting		· · · · · · · · · · · · · · · · · · ·		
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17		(A & & &	Barran en las sels	
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
•	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology .				
15	Royalties				
16	Occupancy				
17	Travel .				· — — —
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				<u> </u>
20	Interest				
21	Payments to affiliates .				
22	Depreciation, depletion, and amortization				
23	Insurance .	, , , , , , , , , , , , , , , , , , , ,	, ,		
24	Other expenses Itemize expenses not covered	, , , ,	the following	1363	
	above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column		10.00		
	(A) amount, list line 24e expenses on Schedule O)				
а	See attached itemized list	1,226,207	739,639	486,568	
a h	Less reported on line 5, 7 and 9 above	-796,250	-562,189		
C	Lood Topolica on line of F and 0 above	100,200	332, 133	207,001	
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,723,264	2,210,696	486,568	
26	Joint costs. Complete this line only if the	2,720,204	2,210,000	700,000	
	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)		1		

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

32

33

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 2,570,067 1 2,264,503 Cash-non-interest-bearing 2 4,548,972 2 979,150 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, Š 5 trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 6 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 13.753 5,963 Notes and loans receivable, net 8 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 9 . * Land, buildings, and equipment cost or 10a ` a š 1/2 sξå other basis Complete Part VI of Schedule D 10a 132,570 36,995 10c 50,022 10b 82.548 b Less accumulated depreciation 11 11 Investments—publicly traded securities 12 Investments—other securities See Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 13 14 14 Intangible assets 1,261 15 1,261 15 Other assets See Part IV. line 11 6,870,721 3,601,226 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 651,858 554,365 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities . 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 1.014.053 23 Secured mortgages and notes payable to unrelated third parties 1,025,304 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete 760,781 25 495,002 Part X of Schedule D 26 2,063,420 2.437.943 26 Total liabilities. Add lines 17 through 25 X and Organizations that follow SFAS 117 (ASC 958), check here gan Albert 🖟 · ... 经基本证据 经股份 Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 1,163,283 27 4,807,301 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31

4.807,301

6,870,721

32

33

34

1,163,283

3,601,226

Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI			<u>. [</u>	$\underline{\mathbb{L}}$
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,341,	
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,697 _.	
3	Revenue less expenses Subtract line 2 from line 1 .	3		<u>3,644,</u>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	·	1,163,	<u>,283</u>
5	Net unrealized gains (losses) on investments	5			
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			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
		10		4,807	<u>,301</u>
Pa <u>rt</u>	• •			г	 1
	Check if Schedule O contains a response to any question in this Part XII.				<u> </u>
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Both consolidated and separate basis		2a		X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis X Consolidated basis Both consolidated and separate basis		2b	X	X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b_		
			Form	990 (2012)

Form 990 (2012) GLOBAL MINISTRIES FOUNDATION

56-2378045 Page **12**

SCHEDULE A (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

OMB No 1545-0047 2012

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► See separa

► See separate instructions.

Open to Publi
ns. Inspection
Employer identification number

GLO	BALI	MINISTRIES F	FOUNDATION							<u>56-23</u>	378045		
Par	t I	Reason	for Public Ch	arity Status (All org	anization	ns must o	complete	this par	t) See ır	structio	ns		
The o	organ			ion because it is (For									
1		A church, cor	nvention of churc	hes, or association of	churches	described	ın sectio	n 170(b)(1)(A)(i).				
2		A school des	cribed in section	170(b)(1)(A)(ii). (Atta	ch Schedi	ule E)							
3		A hospital or	a cooperative ho	spital service organiza	ation desci	rıbed ın se	ection 170)(b)(1)(A)	(iii).				
4			search organizati me, city, and stat	on operated in conjunc e	ction with	a hospital	described	d in sectio	on 170(b)((1)(A)(iii).	Enter t	he	
5		An organizati	on operated for	the benefit of a college Complete Part II)	or univer	sity owned	d or opera	ted by a o	governme	ntal unit d	escribe	d	
6	\Box			rnment or government	al unit des	scribed in s	section 1	70(b)(1)(<i>A</i>	۸)(۷).				
7	X	_	-	receives a substantial		support f	rom a gov	ernmenta	il unit or fr	om the ge	enerał p	ublic	
8		A community	trust described	n section 170(b)(1)(A)(vi). (Con	nplete Par	rt II)						
9		receipts from support from	activities related gross investmen	receives (1) more that d to its exempt function at income and unrelate after June 30, 1975 Si	nssubjed d busines	ct to certai s taxable	n exception	ons, and (ess sectio	2) no mor n 511 tax)	e than 33	1/3% c	of its	5
10	\Box	•	•	d operated exclusively									
11	H			d operated exclusively						to carry o	ut the		
		purposes of 6 509(a)(3). Ch	one or more pub neck the box that	licly supported organiz describes the type of	ations des supporting	scribed in g organiza	section 50 ation and o	09(a)(1) o complete l	r section 5 lines 11e t	509(a)(2) hrough 1	See se 1h		d
	a Type I b Type II c Type III—Functionally integrated d Type III—Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified												
е	Ш											action	
			er than foundation section 509(a)(2	n managers and other	man one	or more pr	ubliciy suf	oporteu oi	yanızandı	is describ	Jeu III Si	SCHOIT	
					fram tha II	DC that it i	io o Typo	I. Type II.	or Type II	l cupporti	na		
f		_	tation received a , check this box	written determination	irom me n	KS macic	is a Type	і, туре ії,	or type ii	Supporti	ilg		
g				ne organization accept	ed any gif	ft or contri	bution froi	m any of t	he				
		following per			. •								
				or indirectly controls, e				ersons des	scribed in	(11)		Yes	No
				erning body of the sup		ganization'	?.				11g(i)	-	
		• •	•	person described in (i)		u) abovo3			•		11g(ii) 11g(iii)		
h			-	of a person described							[rig(iii)	Д	
h Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1–9 above or IRC section (see instructions)) (iv) Is the organization in col (i) listed in your governing document? (v) Did you notify the organization in col (i) organization in col (i) organization in col (i) organized in the US?					(VII) An	nount of mo support	onetary						
					Yes	No	Yes	No	Yes	No	<u></u>		
(A)													
(B)													<u> </u>
(C)					,					ļ	<u> </u>		
(D)								_		-	<u> </u>		
(E)								,					
			1 .			1		l . °	·[1	1		

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)

Section A Public Support

	ion A. Public Support	(-) 0000	(1-) 0000	(-) 0040	(-1) 0044	(=\ <u>2042</u>	(f) Total
Caler	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 ")	4,211,382	5,356,228	2,265,567	4,441,918	5,662,366	21,937,461
2	Tax revenues levied for the organization's						
	benefit and either paid to or expended on	1					
	its behalf						
3	The value of services or facilities			[
	furnished by a governmental unit to the	l					
	organization without charge		,		_		
4	Total. Add lines 1 through 3	4,211,382	5,356,228	2,265,567	4,441,918	5,662,366	21,937,461
5	The portion of total contributions by each	Programme to the second				of the property of	
	person (other than a governmental unit		4-10-224-15	4	tree same		
	or publicly supported organization)						
	included on line 1 that exceeds 2%	25					
	of the amount shown on line 11,	Jac.					
	column (f)	ing , in the					
6	Public support. Subtract line 5 from line 4	Prof. E. Property		がある。		を受ける	21,937,461
Sect	ion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4 .	4,211,382	5,356,228	2,265,567	4,441,918	5,662,366	. 21,937,461
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar	ļ					
	sources	50,959	88,741	177,092	240,273	678,916	1,235,981
9	Net income from unrelated business						
	activities, whether or not the business is	•	,	•			
	regularly carried on	•	,				
10	Other income Do not include gain or	,	٠,				_
	loss from the sale of capital assets	•	*		` '		
	(Explain in Part IV)		,		,		
11	Total support. Add lines 7 through 10	1000 dec	A. S. S. M. 14 300.	20 400 1000		3 4 3 4 3 3 4 5 5 7	23,173,442
12	Gross receipts from related activities, etc. (se	e instructions)				12	
13	First five years. If the Form 990 is for the org	-	t, second, third	fourth, or fifth t	tax year as a se	ection 501(c)(3)	
	organization, check this box and stop here	-					▶ []
Sect	ion C. Computation of Public Support	Percentage					
14	Public support percentage for 2012 (line 6, co			lumn (f))		14	94 67%
15	Public support percentage from 2011 Schedu					15	96 24%
16a	33 1/3% support test-2012. If the organizar	tion did not che	ck the box on li	ne 13, and line	14 is 33 1/3%	or more, check	this box
	and stop here. The organization qualifies as	a publicly supp	orted organizat	ion			▶ X
b	33 1/3% support test—2011. If the organization	tion did not che	ck a box ori line	e 13 or 16a, and	d line 15 is 33 1	1/3% or more, c	heck this
	box and stop here. The organization qualifie	s as a publicly	supported orga	nization			▶
17a	10%-facts-and-circumstances test—2012.	If the organizat	ion did not che	ck a box on line	13, 16a, or 16	b, and line 14	
	is 10% or more, and if the organization meets	s the "facts-and	l-circumstances	" test, check th	is box and stop	here. Explain	ın
	Part IV how the organization meets the "facts	s-and-circumsta	inces" test. The	organization q	ualifies as a pu	blicly supported	l
	organization			•	•	,	▶□
b	10%-facts-and-circumstances test—2011.	If the organizat	ion did not ched	k a box on line	13, 16a, 16b, o	or 17a, and line	_
	15 is 10% or more, and if the organization me						
	Part IV how the organization meets the "facts						
	supported organization					-	▶ 🗌
18	Private foundation. If the organization did no	ot check a box	on line 13, 16a	16b. 17a. or 1	7b. check this b	oox and see	
	instructions .	2. 2 a box			, _,, _,,		▶□

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.)

	if the organization fails to qualify ur	nder the tests	s listed below	, please com	plete Part II.)		
	tion A. Public Support				T	1	
Cale	ndar 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		1				
	received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise					· ·	
	sold or services performed, or facilities furnished						
	in any activity that is related to the						
	organization's tax-exempt purpose				1		
3	Gross receipts from activities that are not an		, , ,				
	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	ıts behalf						
5	The value of services or facilities					[
	furnished by a governmental unit to the						
	organization without charge				1		
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3			I			
	received from disqualified persons				<u> </u>	<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			ļ			
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	12.38				Marketo Late	
	line 6)			A Company	ALL WEST		
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
9 10a	Gross income from interest, dividends,					 	
ıva	payments received on securities loans,				}		
	rents, royalties and income from similar sources						
b	Unrelated business taxable income (less			 -			
IJ	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b				 -		
11	Net income from unrelated business						
••	activities not included in line 10b, whether			•			
	or not the business is regularly carried on						
12	Other income Do not include gain or	-					
-	loss from the sale of capital assets				1		
	(Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)				1		
14	First five years. If the Form 990 is for the organiza	tion's first, seco	nd third fourth	or fifto tax year a	s a section 5016	:)(3)	
•	organization, check this box and stop here		,,,	o , o			
500				- · · · · ·	<u></u>	•	
	tion C. Computation of Public Support I		- 12 (6)			45	
15	Public support percentage for 2012 (line 8, column	• •	e 13, column (t))			15	
16 Sec.	Public support percentage from 2011 Schedule A, F		·		_ 	16	
	tion D. Computation of Investment Inco			(0)		45	
17	Investment income percentage for 2012 (line 10c, c			ımn (t)) .		17	
18 10-	Investment income percentage from 2011 Schedule					18	
19a	33 1/3% support tests—2012. If the organization of						, <u> </u>
	not more than 33 1/3%, check this box and stop he				-		▶∟
þ	33 1/3% support tests—2011. If the organization of						, [
	line 18 is not more than 33 1/3%, check this box and					-	▶∟
20	Private foundation. If the organization did not che	ck a box on line	14, 19a, or 19b,	check this box a	ind see instructio	ns	▶ [

Schedule A (Forn	n 990 or 990-EZ) 2012 GLOBAL MINISTRIES FOUNDATION	56-2378045 Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations require Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any addition	ed by Part II, line 10,
	instructions).	
#		

SCHEDULE D (Form 990)

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. OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

GLO	BAL MINISTRIES FOUNDATION			56-2378045
Par				nds or Accounts. Complete if
	the organization answered "Yes" t	o Form 990, Part IV, line	6.	
		(a) Donor advised for	inds	(b) Funds and other accounts
1	Total number at end of year			·
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year	L		
5	Did the organization inform all donors and do			
	funds are the organization's property, subject	_	-	
6	Did the organization inform all grantees, done			
	used only for charitable purposes and not for		donor advisor, or f	
	purpose conferring impermissible private ber		<u> </u>	∐ Yes ∐ No
Par	Conservation Easements. Com	olete if the organization a	nswered "Yes"	to Form 990, Part IV, line 7
1	Purpose(s) of conservation easements held I	by the organization (check a	Il that apply)	
	Preservation of land for public use (e.g., reci	-		of an historically important land area
	Protection of natural habitat	Ī	=	of a certified historic structure
		L		
•	Preservation of open space	han hald a suglified concer.	ation contribution	in the form of a concentration
2	Complete lines 2a through 2d if the organizate easement on the last day of the tax year	don neid a qualmed conserv	ation whitibution	in the form of a conservation
	easement on the last day of the tax year			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation ease	ements	•	2b
c	Number of conservation easements on a cer		ted in (a)	2c
d	Number of conservation easements included			
_	historic structure listed in the National Regist		,	2d
3	Number of conservation easements modified		nguished, or termi	nated by the organization
	during the tax year ►	, ,		, ,
4	Number of states where property subject to o	conservation easement is lo	cated >	
5	Does the organization have a written policy r	egarding the periodic monite	oring, inspection, h	handling of
	violations, and enforcement of the conservat	on easements it holds?		. Yes No
6	Staff and volunteer hours devoted to monitor	ing, inspecting, and enforcir	ig conservation ea	asements during the year
	•			
7	Amount of expenses incurred in monitoring, it	nspecting, and enforcing co	nservation easem	ents during the year
	▶ \$			
8	Does each conservation easement reported	on line 2(d) above satisfy th	e requirements of	
_	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?	•		Yes No
9	In Part XIII, describe how the organization re			
	balance sheet, and include, if applicable, the		rganization's finan	icial statements that describes
Par	the organization's accounting for conservation Organizations Maintaining Collection		uras or Other Sir	miles Appata
Га	Complete if the organization answered		-	mar Assets.
1a	If the organization elected, as permitted under			
	works of art, historical treasures, or other sin	•		•
	of public service, provide, in Part XIII, the tex			
b	If the organization elected, as permitted under			
	works of art, historical treasures, or other sim	•	knibition, educatio	n, or research in furtherance
	of public service, provide the following amount	-		. .
	(i) Revenues included in Form 990, Part VIII	, line 1		5
_	(ii) Assets included in Form 990, Part X		4h	5
2	If the organization received or held works of			<u> </u>
	following amounts required to be reported un	· ·	eating to these ite	ms .
a	Revenues included in Form 990, Part VIII, lin	e 1		\$
h	Assets included in Form 990. Part X			P Q

Part	III Organizations Maintaining C	ollections of	Art, Hist	orical Tr	reasures, o	r Othe	er Similar Asse	ts (con	tınuec	d)
3	Using the organization's acquisition, acce		records,	check any	of the followi	ng tha	t are a significant			
	use of its collection items (check all that a	apply)	<u></u>	٦						
а	Public exhibition		d <u></u>	Loan	or exchange p	prograi	ms			
b	Scholarly research		е	Other						
С	Preservation for future generations	3								
4	Provide a description of the organization' Part XIII	s collections and	explain h	now they fo	urther the orga	anızatı	on's exempt purpo	se in		
5	During the year, did the organization solid assets to be sold to raise funds rather that							Y€	es 🔲	No
Part	IV Escrow and Custodial Arran	gements. Con	nplete if	the organ	nization ans	wered	"Yes" to Form 9	90, Pa	irt	
	IV, line 9, or reported an amou	-	-	-						
1a	Is the organization an agent, trustee, cus	todian or other in	itermedia	ry for cont	ributions or ot	her as	sets not		_	
	ıncluded on Form 990, Part X?							Ye	es 🔃	No
b	If "Yes," explain the arrangement in Part	XIII and complete	the follo	wing table	•	_				
							· 	mount		
C	Beginning balance					10				
đ	Additions during the year					10				
e f	Distributions during the year Ending balance					1				
_		- Farm 000 Dan	4 V lone 0	40		<u> </u>	•		- \ <u>\</u>	No.
2a	Did the organization include an amount of						D 13/11	Ye	es 🔼	No
b	If "Yes," explain the arrangement in Part									
Part	V Endowment Funds. Complete		1					1 =		
4-	Pagazana of uses belongs	(a) Current year	(b) Pr	or year	(c) Two years	back	(d) Three years back	(e) Fo	ur years	back
1a b	Beginning of year balance Contributions	· · · · · · · · · · · · · · · · · · ·						 		
C										
•	s Net investment earnings, gains, and losses									
d	Grants or scholarships	i								
e	Other expenditures for facilities									
	and programs							<u> </u>	<u></u>	
f	Administrative expenses	<u> </u>								
g	End of year balance		<u>L</u>		<u> </u>			<u> </u>		
2	Provide the estimated percentage of the	current year end		(line 1g, co	olumn (a)) hel	d as				
a	Board designated or quasi-endowment	0/	<u>%</u> .							
C	Permanent endowment Temporarily restricted endowment	% %								
C	The percentages in lines 2a, 2b, and 2c s		%							
За	Are there endowment funds not in the po	-		on that are	held and add	ministe	red for the			
-	organization by		nga mean	on that are	, mora ama aa,			1	Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		
b	If "Yes" to 3a(II), are the related organization							3b		
4	Describe in Part XIII the intended uses of									
Part	VI Land, Buildings, and Equipm	nent. See Forn	<u>n 990, P</u>	art X, line	<u>∍ 10.</u>					
	Description of property	(a) Cost or ot (investm		1	ost or other is (other)) Accumulated depreciation	(d) B	ook valu	e
1a	Land									
b	Buildings			<u> </u>						
C	Leasehold improvements		 .	-	465.555					
d	Equipment				132,570		82,548		5	50,022
<u>e</u> Total	Other . Add lines 1a through 1e (Column (d) mu	st equal Form 99	00, Part X	, column (i	B), line 10(c))	•		5	0,022

Part VII	Investments—Other Secur	ities. See Form 990, Part X	(, line 12	
(a	Description of security or category (including name of security)	(b) Book value	(c) Method of v Cost or end-of-year	
(1) Financial				
	neld equity interests			
			<u> </u>	
(A)				
(B)				<u>-</u> -
(C) (D)				
(E)			<u> </u>	· · · · · · · · · · · · · · · · · · ·
(F)				
(G)				
(H)				
<u>(I)</u>				
	,	▶ 	V III - 40	* .* : * *
Part VIII	Investments—Program Re	lated. See Form 990, Paπ /		
	(a) Description of investment type	(b) Book value	(c) Method of vo	
(1)			·	
(2)				
(3)	·			
(4)	-			<u> </u>
(5)				
(6)				
(8)				
<u>(9)</u> (10)				
) must equal Form 990, Part X, col (B) line 13)	>		
Part IX	Other Assets. See Form 99	0. Part X. line 15.		-)
		(a) Description		(b) Book value
(1)				
(2)				
(3)		<u>.</u>		
_(4)				
(5)				
(6)				
(8)				
(9)	1	•		
(10)				
	mn (b) must equal Form 990, Part X,		<u> </u>	
Part X	Other Liabilities. See Form	990, Part X, line 25.		7,
1.	(a) Description of liability	(b) Book value	* * * * -	n de
	I income taxes	405.000	*	,
	e to Affiliate-GMF-PAC	495,002	* ,	
<u>(3)</u> <u>(4)</u>				,
(5)			*	·
(6)			-	•
(7)				
(8)				
(9)			, ,	
(10)			4	
(11)			4	
	, made digate / dim deta) - dieta, dei (1) mid 10 /	495,002		
	C 740) Footnote In Part XIII, provide the text			anization's liability
ioi uncertain (a	ax positions under FIN 48 (ASC 740) Check	There is the text of the loothole has be	sen provided in Fart Alli	.

Sched	ule D (Form 990) 2012 GLOBAL MINISTRIES FOUNDATION		56-2378045	Page 4
Par	Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue pe	r Return_	
1	Total revenue, gains, and other support per audited financial statements .		1	11,757,976
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		500 T	
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants .	2c		
d	Other (Describe in Part XIII.)	2d 5,416,694	4	
е	Add lines 2a through 2d		2e	5,416,694
3	Subtract line 2e from line 1		3	6,341,282
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	6,341,282
Par	t XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses	per Return	
1	Total expenses and losses per audited financial statements		1	6,785,502
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		1. 1. 1.	
а	Donated services and use of facilities	2a	NA(S	
b	Prior year adjustments	2b		
С	Other losses .	2c		
d	Other (Describe in Part XIII)	2d 4,088,23	B	
е	Add lines 2a through 2d		2e	4,088,238
3	Subtract line 2e from line 1		3	2,697,264
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		A. See	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c .	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	2,697,264
Par	t XIII Supplemental Information			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Pai	t III lines 1a and 4. Part I	V. lines 1b and	1 2b.
	V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Als			,
	conal information			
addi	and mornator			
Part	X1 Line 2d Total revenue of subsidiary not included in Form 990-\$5,416,694			
Part	Part X11 Line Line 2d Total expenses of subsidiary not included-\$4,088,238			

Schedule D (Form 990) 2012	GLOBAL MINISTRIES FOUNDATI	ON	56-2378045	Page 5
Part XIII Supple	emental Information (continued	1)		
				_
·				
·				
				-

Schedule F (Form 990)

Statement of Activities Outside the United States

Form 990,

2012 Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

Inspection

Name of the organization		•			Employer identification number
GLOBAL MINISTRIES FOUN				_	56-2378045
	ormation on A 990, Part IV, line		i de the United States . C	omplete if the organizat	ion answered
assistance, the granted the grants or assistance	es' eligibility for thee? cribe in Part V the	ne grants or ass	rds to substantiate the amountstance, and the selection critical procedures for monitoring the	eria used to award	Yes No
3 Activities per Region (T	he following Par	t I, line 3 table ca	an be duplicated if additional	space is needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) a program service, describe specific type of service(s) in region	expenditures for
(1)					
(2)					
(3)					
(4)					
(5)		,			
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total b Total from continuation					

sheets to Part I

C Totals (add lines 3a and 3b)

56-2378045

GLOBAL MINISTRIES FOUNDATION

Schedule F (Form 990) 2012

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

				٠١	::::::::::::::::::::::::::::::::::::::	B 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
•		Central & South Asia	Outreach Project	001				
Ē				308,472 Checks	Checks			
(2)		Africa	Outreach Project	113.333 Checks	Checks			
		South America	Outreach Project &					
(3)			Child Sponsorship	11,300 Checks	Checks			
		a and	Child Sponsorship	1				
(4)		the Calibbean		132,295 Checks	Checks			
ţ		Europe	Child Sponsorship	0				
(5)				6,189	6,189 Checks			
(9)		Australia	Outreach Project	1,479	1.479 Checks			
(2)								
(8)								
(6)								
(10)								
(11)								
(12)								
(13)	~							
(14)								:
(15)								
(16)								
7								

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

Enter total number of other organizations or entities က

Page 3

GLOBAL MINISTRIES FOUNDATION

Schedule F (Form 990) 2012

Part III

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

Schedule F (Form 990) 2012 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance 4 (14) (16) (18) € (2) ව (2) 9 8 (8) 6 (10 E (12) (13) (15) (17)

	(· -···		
		_	
Part IV	Foreian F		
	- Poreion P	·nrme	

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

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

SCHEDULEI (Form 990)

iduals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047

es" to Form 990, Part IV, line 21 or 22.

rm 990.

200° pen to Inspec

Employer identification number

56-2378045

	Governments, and Individu
Today of the Today	Complete if the organization answered "Ye
Department of the Treasury Internal Revenue Service	► Attach to Fo
Name of the organization	
GLOBAL MINISTRIES FOUNDATION	FOUNDATION

General Information on Grants and Assistance

Part I

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

2

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II

(h) Purpose of grant or assistance Ministry (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) . (e) Amount of noncash assistance . Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 50,000 10,000 20,800 5,000 (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 62-0560796 47-0856794 27-4217698 58-1715827 (P) EIN 3150 Brunswick Rd Memphis, TN 3813 (3) Ridgeway Baptist Church 2500 Ridgeway Rd Memphis, TN 3811 (4) Shepherds' Haven of Rest 5525 Chester Rd Arlington, TN 38002 1 (a) Name and address of organization (2) Repairing the Breach 2107 Ball Rd Memphis, TN 38114 or government Point of Impact € 2 7 3 9 \mathbf{E} 6 €;

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

Schedule ! (Form 990) (2012)

Page 2

Schedule I (Form 990) (2012)

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

of (e) Method of valuation (book, (f) Description of non-cash assistance ance FMV, appraisal, other)						
(d) Amount of non-cash assistance						
(c) Amount of cash grant	319,439					
(b) Number of recipients	63					
(a) Type of grant or assistance						
(a)	1 Cash grants	2	4	N.	9	

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

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

Open To Public Inspection

OMB No 1545-0047

Name of the organization

Part I

Employer identification number

GLOBAL MINISTRIES FOUNDATION 56-2378045 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only)

		(b) Relationship between disqualified person		(d) Cor	rected?
7	(a) Name of disqualified person	and organization	(c) Description of transaction	Yes	No
(1)					<u> </u>
(2)					
(3)	-			<u> </u>	
(4)					
(5)					
(6)					<u> </u>

Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part II Loans to and/or From Interested Persons.

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

organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan		to or from inization?	(e) Original principal amount	(f) Balance due	(g) In (default?	by bo	proved ard or uttee?	(i) W agree	
			То	From			Yes	No	Yes	No	Yes	No
(1)			_									
(2)							_					
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												L
Total					▶ \$							

Grants or Assistance Benefiting Interested Persons. Part III

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				<u> </u>
(6)				
(7)				
(8)			<u> </u>	
(9)				
10)				

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

20**12**

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization 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.

Inspection
Employer identification number

56-2378045 **GLOBAL MINISTRIES FOUNDATION** Form 990 Part VI Section A Line 6,7,8 The Corporation has members that elect new board members to one year terms and officers are approved each year All major decisions are approved by the majority of the board members which total 4 with one non voting Form 990 Part VI Section B Line 11,12,15, 11(a)-Yes, 12(a)-No,12(b)-and 12(c)-All officers and directors are informed of possible conflicts at board meetings and on a regular basis 15(a)&15(b)-Executive compensation paid shall be consistent with industry norms and as determined by the board in its review of peer charitable organizations. In this matter, the board shall consider the value of the services rendered by the executive in his/her official corporate position, the professional and educational credentials of the executive officer, and the effectiveness and productivity of the officer Form 990 Part IV Line Line 28 (b) Added Part IV Schedule L for Business Transactions involving interested persons

Schedule O (Form 990 or 990-EZ) (2012)	
Name of the organization	Employer identification number
GLOBAL MINISTRIES FOUNDATION	56-2378045
······	
	-
	•

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

١ OMB No 1545-0047

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

■ Attach to Form 990.

▶ See separate instructions.

|--|

Employer identification number

(f)
Direct controlling
entity 56-2378045 (e) End-of-year assets Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Total income (c)
Legal domicile (state
or foreign country) Primary activity (a)
Name, address, and EIN (if applicable) of disregarded entity GLOBAL MINISTRIES FOUNDATION Part I 2 € 5 ල 3 9

one or more related tax-exempt organizations during the tax year.)	uring the tax year.)						
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	(b)(13)
						Yes	N _o
(1) Preservation of Affordability Corp 56-2444917 65 Germantown Ct., Suite 409 Cordova, TN 38088	Low Income Housing	TN	501(C)(3)		Global Ministries F	×	
(2)							
(6)							
(4)							
(9)							
(9)							
(i)							

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had

· Part II

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

Schedule R (Form 990) 2012

R (Form 990) 2012	GLOBAL MINISTRIES FOUNDATION 56-2378045 Page	e 2
Identification of	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34	
because it had or	because it had one or more related organizations treated as a partnership during the tax year.)	'

(k) Percentage ownership												(i) Section 512(b)(13) controlled entry?	N _o								0) 2012
-				+							art	(I) Section 512(b controller entity?	Yes								rm 99
(J) General or managing	partner?	Yes No		1							990, P	(h) Percentage ownership									le R (Fo
				1							Form										Schedule R (Form 990) 2012
Code V—UBI	of Schedule K- (Form 1065)										as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part nizations treated as a corporation or trust during the tax year.)	(g) Share of end-of-year assets									
(h) Disproportionate allocations?		å									wered)										
		Yes						ļ	<u> </u>	<u> </u>	n ans year.	(f) Share of total income									
(g) of end-of- r assets											izatio	Sha						<u></u>			
(g) Share of end-of- year assets											Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answard ine 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	(e) Type of entity (C corp, S corp, or trust)								i	
if total me											e if the rust du	(e) Type of Comp, Soor									
(f) Share of total income											mplete))									
———— ed ⊭	iii 514)		· · ·								st (Co poratic	(d) Direct controlling entity									
(e) Predominant income (related,	unrelated, excluded from tax under sections 512-514)										r Trus a cor	Direc					! 				
Pre	exc tr section										tion c	micile gn country									
rolling /			_								rpora s treat	(c) Legal domicile (state or foreign country)									
(d) Direct controlling entity											a Co	(sta	_								
	5 c S	\dashv							-		ble as	tivity									
(c) Legal domicite	(state or foreign country)										Identification of Related Organizations Taxable IV, line 34 because it had one or more related orga	(b) Primary activity									
											ations ore rel	ā.									
) activity											ganiza or me										
(b) Primary activity											d one	zation									
				·							Relate e it ha	d organi:									
						-					on of l	of relate									
nd EIN of atron											fication 34 b	(a) and EIN									
(a) dress, ar d organiz											Identi V, line	(a) Name, address, and EIN of related organization									
(a) Name, address, and EIN of related organization												Name,									
z			(£)	6	(5)	(3)	(4)	(5)	(9)	ω	Part IV			(1)	(2)	(3)	(4)	(5)	(9)	(2)	

GLOBAL MINISTRIES FOUNDATION

Schedule R (Form 990) 2012

56-2378045 Page 3

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

) 201	rm 99(Schedule R (Form 990) 2012	Schedu		
					(5)
					(4)
					(3)
		Ē			(2)
	written	Checks v	3,750,000 Checks written	-	(1) Preservation of Affordability Corp
ed ed	Method of determining amount involved	Method of amou	Amount involved	Transaction type (a–s)	Name of other organization
	nolds.	n threst	ationships and transactic	, including covered rel	2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.
×		18			s Other transfer of cash or property from related organization(s).
×		+			r Other transfer of cash or property to related organization(s).
1				· · · · · · ·	
×		5 4			
		3.			
×		9			
×	_	두			
×		13			m Performance of services or membership or fundraising solicitations by related organization(s)
×		=		·	
×		¥	•		k Tease of facilities equipment or other assets from related organization(s)
×		=			
×		i.			i Exchange of assets with related organization(s)
×		ŧ			
×		10			a Sale of assets to related organization(s)
×		#			f Dividends from related organization(s)
				•	
×		٩		•	
×		19			
	×	10			
×		1p			b Gift, grant, or capital contribution to related organization(s)
×		1 a			a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
	· ·	ź	Parts II–IV?	l organizations listed ın	1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?
å	Yes				Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

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

(a) (b) (c)	(p)		(b) (a) (b) (b)	(e)		€		Ξ		Ξ	3	1	(£
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income (related, unrelated, excluded from tax under section 12,514)	Are all partners section 501(c)(3) organizations?	artners ion ()(3)	Share of total income	Share of end-of-year assets	Disproportionate allocations?	ionate (Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?		Percentage ownership
			300000	Yes	ę		-	Yes	2		Yes	ę	
(1)													
(2)													
(6)									-				
(4)													
(5)													
(9)					,								
(D)													
(8)													•
(6)													
(10)													
(11)													
(12)													
(13)												_	
(14)													
(15)													
(16)													
										Sched	ule R (I	Form 99	Schedule R (Form 990) 2012

Schedule R (For	m 990) 2012	GLOBAL MINISTRIES FOU	NDATION	· ·	56-2378045	Page 5
Part VII		ental Information				
	Complete instruction	this part to provide additio	nal information fo	r responses to quest	ions on Schedule R (see	
						~-
	· - 					

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

		Cash	_Noncash
1 Federated Campaigns	1 _		
2 Membership dues	2		
3 Fundraising events .	3		
4 Related organizations	. 4 _	3,750,000	
5 Government grants (contributions)	5 _		
6 All other contributions, gifts, grants, and similar amounts not included above			
Contributions		1,835,242	
Project Administration fees		77,124	
Other contributions total .	6 _	1,912,366	
7 Total	7	5,662,366	

Part X, Line 7 (990) - Other Notes

	ŀ					
	lotal:		13,753	5,963		
					Allowance	
			Net balance		for doubtful	
		Original	due beginning	Balance due	accounts	
Borrowe	Borrower's name	amonnt	of year	end of year	end of year	Purpose of loan
Real Estate Loans			13,753	5,863		
Due from affiliate						
Employee accounts receivable	ts receivable			100		

GLOBAL MINISTRIES FOUNDATION

Part X, Lines 10a and 10b (990) - Land, Buildings, and Equipment

								Total:	132,570	61,485	82,548		36,995	50,02
				Leasehold			Check if	Check If		Beginning	Ending			
				Improve-			Investment	Asset	Cost/Other	Accumulated	Accumulated	Disposals/	Beginning	Ending
	Category or Item	Land	Buildings	ments Equi	Equipment	Other	Asset	Disposed	Basis	Depreciation	Depreciation	Adjustments	Balance	Balance
-	Office equipment								93,912		65,584		17,613	28,328
7	Leasehold improvements			1	×				14,431	1,850	4,366			10,06
က	Auto				×				24,227		12,598		19,382	11,629

Part X, Line 15 (990) - Other Assets

Total:	1,261	1,261
Description	Beginning	End
1 Deposits	1,261	1,261

Part X, Lines 23 and 24 (990) - Secured and Unsecured Notes Payable

		Total:	1,025,304	1,014,053
			Balance due	
		Check if	beginning	Balance due
	Lender's name	Unsecured	of year	end of year
1	1st Tenn Bank		996,600	994,109
2	1st Tenn Bank			
3	GMAC		26,848	19,944
4	Richard Hamlet	X		
5	Dell Computer		1,856	

Part X, Line 25 (990) - Other Liabilities

	Total:	760,781	495,002
	Description	Beginning	End
1	Federal income taxes		
2	Payable to Affiliate-GMF-PAC	760,781	495,002