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Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047 Open to Public Inspection

AF	or the	2012 calendar year, or tax year beginning and	ending		
В	Check if applicable	C Name of organization		D Employer identific	cation number
	Addre	Church Planting International, Inc.			
	Name change	Doing Business As		59-3	493819
	Initial return Termin ated		Room/suite	E Telephone number 770-	r 535–7008
F	Amend	· · · · · · · · · · · · · · · · · · ·		G Gross receipts \$	87590.
F	Applic			H(a) Is this a group re	•
	pendir	F Name and address of principal officer: Rev Dr George Hutch	hinson		Yes X No
		PO Box 836, Gainesville, GA 30503		H(b) Are all affiliates inc	
T	Гах-ехе	mpt status: X 501(c)(3) 501(c) () ((Insert no) 4947(a)(1) (or 527	1 ' '	list. (see instructions)
		e: ► N/A		H(c) Group exemption	
KF	orm of	organization X Corporation	L Year		State of legal domicile GA
P	art I	Summary	•	<u>.</u>	
-	1	Briefly describe the organization's mission or most significant activities: Organ	nizati	on for the	Support of
Activities & Governance		Foreign Missions.		 7	
Ĕ	2	Check this box If the organization discontinued its operations or dispose	sed of more	than 25% of its net as	sets.
ŏ.	3	Number of voting members of the governing body (Part VI, line 1a)		ပို့ပြု 3	6
ر مع	4	Number of independent voting members of the governing body (Part VI, line 15)	3 7 201	a Q 4	4
es	5	Total number of individuals employed in calendar year 2012 (Part Vitine 2a)	<i>D</i> • 601	ိ တ္တု 5	0
Viti	6	Total number of volunteers (estimate if necessary)		6	0
\cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12 \Box \Box	EN U	7a	0.
_	ь	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
Revenue				Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		102423.	87590.
	9	Program service revenue (Part VIII, line 2g)		0.	0.
æ	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	0.	0.
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		102423.	87590.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	ļ	76841.	90471.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		8400.	7200.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
χ̈́		Total fundraising expenses (Part IX, column (D), line 25)	0.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2937.	2937.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	88178.	100608.
- 4	19	Revenue less expenses. Subtract line 18 from line 12		14245.	-13018.
Net Assets or Fund Balances	_		Be	ginning of Current Year	End of Year
Sset	20	Total assets (Part X, line 16)		23121.	10103.
age a	21	Total liabilities (Part X, line 26)	<u> </u>	0.	0.
长	22	Net assets or fund balances. Subtract line 21 from line 20		23121.	10103.
	art II	Signature Block			
		Ities of perjury, I declare that I have examined this return, including accompanying schedules			y knowledge and belief, it is
true	, correc	t, and complete Declaration of preparer (other than officer) is based on all information of wh	iich preparer		
0:	_	Signature of officer (March 23,	2513
Sig		Rev Dr George Hutchinson, Director		Date	
Her	e	Type or print name and title			
			, Tr	Date Check	PTIN
Paid	,	Print/Type preparer's name Joseph W Cwik, CPA	<i>i</i> 1	2/20/12	
	parer	Firm's name Joseph W Cwik, CPA, PC	U		P01434124 58-1907822
	Only	Firm's address 3502 Nancy Place		Firm's EIN ▶	30-130/022
Uad	Jilly	Gainesville, GA 30506		Dhan - 7	702973272
Max	the I	S discuss this return with the preparer shown above? (see instructions)		Phone no /	Yes No.
IVICI	• LIICS 17				I ITMS I INO

LHA For Paperwork Reduction Act Notice, see the separate instructions.

232001 12-10-12

	1990 (2012) Church Planting International, Inc. 59-349	3819	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission:		
	Organization for the Support of Foreign Missions		
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 No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	expenses	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total e		
	revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$ Including grants of \$ 28326 .) (Revenue \$		0.)
74	Support of the Reformed Presbyterian Church of Ugnada, Africa		
	bupbete of the Reference from the order of ognically introduced		
		··	
4b	(Code) (Expenses \$including grants of \$6864 •) (Revenue \$		0.)
	Support of the Steven Bradford Ministry, Africa		
			
			
	24052		
4c			0.)
	Support of the George P Hutchinson Ministry		
		<u>~</u>	
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$ 31228 •) (Revenue \$		
_4e	Total program service expenses		
		Form 9	90 (2012)

Pa	t IV Checklist of Required Schedules	<u> </u>	<u></u>	age 🔾
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	}		
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	i		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5_		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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			l
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			ŀ
	Part VI	11a		Х
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
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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		X
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
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	_		.,
_	Schedule D, Parts XI and XII	12a	ļ	Х
Ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			.,
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		v	
45	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		v	
46	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 to individuals		v	
17	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	Х	-
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	 -	Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
19	1c and 8a? If "Yes," complete Schedule G, Part II	18	-	X
	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	4.		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19		X
		20a	I	1 42

Form **990** (2012)

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

21 Dut the organization report more than \$5,000 of grants and other assistance to any powerment or organization in the United States on Part IX, unit (a) the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, occlum IAI, line 21 if "Yes," complete Schedule Parts 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 11 if "Yes," complete Schedule Schedule IX I "Not", go to line 25 24 Did the organization have a lax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002 if "Yes," answer line 24th through 24d and complete Schedule K. If "No", go to line 25 25 Did the organization maintain an escrive account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? 26 Did the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax-exempt bonds? 27 Did the organization maintain an escrive account other than a refunding escrive at any time during the year? 28 Section 501(6)3 and 501(6)4 organizations to Did the organization engage 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 prior Former 980 or 990-E27 if "Yes," complete Schedule L, Part IV be a complete Schedule L, Part IV in the organization prior Former 980 or 990-E27 if "Yes," complete Schedule L, Part IV instructions for explicable filing thresholds, conditions, and exceptions); 28 Was a loan to or by a current or former officer, director, trustee, key employee, bytes at complete Schedule L, Part IV instructions for explicable filing thresholds, conditions, and exceptions; 29 A Carmity of the organization sell-exchalle Sc				Yes	No
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 Did the organization answer "Yes" to Part VIII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, inustees, key employees, and highest compensated employees? If "Yes," complete Schedule I. Schedule I. Part II and 18 II and 1	21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
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 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I, I'mo', go to mae 25 b) Did the organization invest any proceeds of tox-exempt bonds beyond a temporary period exception? c) Did the organization maintain an escrew account other than a refunding secrow at any time during the year of the organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part I b is the organization wave that the register in an excess benefit atmascation with a disqualified person outstanding as of the end of the organizations in a proof year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule I, Part II b Did the organization excess benefit atmascation with a disqualified person outstanding as of the end of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule I, Part II b Did the organization party to a business transaction with one of the following parties (see Schedule I, Part IV I Did the organization party to a business transaction with one of the following parties (see Schedule I, Part IV I Standard or applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, fursitee, or key employee? If "Yes," complete Schedule I, Part IV I See I Amily member of a current or former officer, director, fursitee, or key employee or a family member of a family member of a current or former officer, director, f		United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u>X</u>
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 Schedulus J 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedulus I. If "No," to line 25 Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds are provided and so that the properties of the organization and that the transaction and the organization suggest of the organization secrows account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? Did the organization acts as an 'on behalf of' issuer for bonds outstanding at any time during the year? Did the organization are year? If "Yes," complete Schedulus I. Part II and that the transaction has not been reported on any of the organization sprage on an excess benefit transaction with a disqualified person on a price year, and that the transaction has not or by a current of former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organizations tax year? If "Yes," complete Schedule I. Part II and the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant adection committee member, or to a 55% controlled entity or family member of any of these persons? If "Yes," complete Schedule I. Part IV and the organization party to a business transaction with one of the following parties (see Schedule I., Part II). Was the organization of party to a business transaction with one of the following parties (see Schedule I., Part II). Was the organization of the circ	22				
and former officers, drectors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule U 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 240 through 24d and complete Schedule K. If "No", go to line 25 b) Did the organization invest early proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b			22	X	
Schedule J 24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December \$1,2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	23				
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 "Pes," araswar lines 24b through 24d and complete Schedule It, I Per It is the William of the Per It is the Schedule It, I Per It Is It is the Organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Did the organization naves an o'n behalf of' issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? 24d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 25d Section 501(o)(3) and 501(o)(4) organizations. Did the organization engage 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 prior Forms 990 or 990-E27? If "Yes," complete Schedule I., Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule I., Part III 27d Did the organization a party to a business transaction with one of the following parties (see Schedule I., Part IV instructions for applicable filing thresholds, conditions, and exceptions): 28d A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I., Part IV instructions for applicable filing thresholds, conditions, and exceptions? 27d Was the organization or every even more than \$25,000 in non-cash contributions? If "Yes," complete Schedule I., Part IV instructions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule III P					l .
last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 Did the organization maintain an escrow account other than a refunding secrew at any time during the year to defease any tax-exempt bonds? d Did the organization maintain an escrow account other than a refunding secrew at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(q)3 and 501(q)4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II b is the organization aware that it engaged in an excess benefit transaction with a disqualified person on the thin the transaction has not been reported on any of the organization for Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II 25b X2 Was also not or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part IV 27b Unit the organization provide a grant or other assistance to an officer, director, trustee, well as the part of the part of the part of the organization provide a grant or other assistance to an officer, director, trustee (see Schedule L, Part IV 28a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c A cu		·	23		
Schedule K. If "No", go to line 25 b) Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c) Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d) Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d d) Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d d) Did the organization avaire that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I is the organization provide a grant or other assistance to an officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? "If "Yes," complete Schedule L, Part II is the organization provide a grant or other assistance to an officer, director, trustee, we pemployee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): 27 X was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV instruction or former officer, director, trustee, or key employee for a family member thereof) was an officer, director, trustee, or key employee for a family member thereof) was an officer, director, trustee, or key employee for a family member thereof) was an officer, director, trustee, or key employee for a family member thereof) was an officer, if "Yes," complete Schedule	24a				
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an on behalf of issuer for bonds outstanding at any time during the year? 24d 25d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I! b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I! 25b X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II! 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable flighing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule A part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-32 II" "Yes," complete Schedule R, Part II Did the organization have a cont			04-		v
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d) Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 24					
any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Is the organization eware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 28 Was a loan to or by a current or former officer, director, trustee, key employee, bighest compensated employee, or disqualified contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule II 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule II 30 Did the organization on the schedule II 31 Did the organization on the schedule II 32 Did the organization on the schedu			245		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 28a Section 501(e)(3) and 501(e)(0) and 501(e)(0) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I., Part I 25a X b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's pror Forms 990 or 990-E27 If "Yes," complete Schedule I., Part II 25b X 27 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule I., Part II 27 X 28 Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I., Part IIV 28 Was the organization a party to a business transaction with one of the following parties (see Schedule I., Part IIV 29 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I., Part IV 29 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I., Part IV 29 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I., Part IV 29 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I., Part IV 29 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I., Part IV 29 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I., Part IV 29 B of the organ	C		240		
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If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 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 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 To lid 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 VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O			30		<u>X</u>
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Note. All Form 990 filers are required to complete Schedule O	38		<u> </u>		
			38		Х
			Form	990	(2012)

	990 (2012) Church Planting International, Inc. 59-34938	319	Pa	age 5
Paı	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return		1	
ь	•	2b]	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	****		
3a		3a		Х
	· · · · · · · · · · · · · · · · · · ·	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
		4a		Х
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	·	5c		
	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		Х
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	- 1		}
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
9	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		ļ
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	····	ļ
9	Sponsoring organizations maintaining donor advised funds.	-		
а	·	9a		
b		9b		ļ
10	Section 501(c)(7) organizations. Enter:			
а	·			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders 11a	Į		
Ь	, , , , , , , , , , , , , , , , , , ,	ļ		
	amounts due or received from them.)	40		ĺ
	· · · · · · · · · · · · · · · · · · ·	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	į		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	12-		
а	· (13a		
L	Note. See the instructions for additional information the organization must report on Schedule O.	ļ		
D	Enter the amount of reserves the organization is required to maintain by the states in which the	£		ł

Form **990** (2012)

14a

X

13b

organization is licensed to issue qualified health plans

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

c Enter the amount of reserves on hand . .

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

						X
	Check if Schedule O contains a response to any question in this Part VI					
Sec.	tion A. Governing Body and Management			· · ·	Yes	
		۱	l 6	:[res	No
та	Enter the number of voting members of the governing body at the end of the tax year	1a		Ή Ι		
	If there are material differences in voting rights among members of the governing body, or if the governing					
_	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0	1ь	4	.		
_	Enter the number of voting members included in line 1a, above, who are independent			1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	P WILL	any other	2	х	
3	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the	a dire	et supervision			
3	of officers, directors, or trustees, or key employees to a management company or other person?	io ali o	ot supervision	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form	990 w	s filed?	4	- 1	X
5	Did the organization become aware during the year of a significant diversion of the organization's as			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 a	ppoint	one or			
	more members of the governing body?			7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders. or			
_	persons other than the governing body?			7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following			
	The governing body?	•	Ū	8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached	at the			
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	evenu	e Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	hapte	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dy befo	ore filing the form?	11a	X	
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			12a		X
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to coi	officts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," c	escnbe			
	in Schedule O how this was done			12c		
13	Did the organization have a written whistleblower policy?			13		X
14	Did the organization have a written document retention and destruction policy?			14	<u> </u>	X
15	Did the process for determining compensation of the following persons include a review and approve	al by ı	ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	?				
а	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b	ļ	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment	with a			
	taxable entity during the year?			16a	ļ	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its	participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	anizatı	on's			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ► None					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sec	tion 501(c)(3)s only)	avaılat	ole	
	for public inspection. Indicate how you made these available. Check all that apply.	<u> </u>				
	Own website Another's website X Upon request Other (explain		· ·			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	onflict	of interest policy, a	nd fina	ncıal	
	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 a	and red	ords of the organiz	ation:		
	Rev George Hutchinson - 770-535-7008				_	
23200	PO Box 836, Gainesville, GA 30503				000	(00 : 5:
12-10	12			Forn	1 990	(2012)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. 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.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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.

(A) Name and Title	(B) Average hours per week	(do	not c		ition	than	one han	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below 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)	compensation from the organization and related organizations
(1) Rev Dr George P Hutchinson President	16.00							0.	0.	0.
(2) Rev Steven T Bradford	0.00									
Vice President								0.	0.	0.
(3) Robert E Spooner	0.00									
Secretary		1						0.	0.	0.
(4) Rev James G Romaine	0.00									
Director		_	<u> </u>					0.	0.	0.
(5) Rev Donald T Williams	0.00	1								_
Director								0.	0.	0.
(6) Rev G Dewey Roberts	0.00									
Director			\vdash	_	<u> </u>	ļ	<u> </u>	0.	0.	0.
(7) Linda L Hutchinson	8.00	-			ĺ					
Bookkeeper		-	-	<u> </u>	ļ	_		0.	0.	0.
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		-								
	<u> </u>			1	1	_	1	1	<u> </u>	<u> </u>

	A. Officers, Directors, Trus (A)	(B)			(C	;)			(D)	(E)			(F)	
Nam	Average hours per		Position not check more to unless person is		than o		Reportable compensation	Reportable compensation			imate ount d			
		week	offic				r/trus		from	from related			ther	•
		(list any	director						the	organizations		-	ensat	
		hours for related	5	8			ated		organization	(W-2/1099-MIS	C)		m the	
		organizations	trustee	trustee		8	Theur		(W-2/1099-MISC)		İ	-	ınızatı relate	
		below	Individual	Institutional	_	Кеу етріоуве	3250	25					nizatio	
		line)	Indiv	Instit	Officer	Keye	Highest compensate employee	Former						
						-						_		
														
												<u>.</u> .		
														
				 										
			-											
b Sub-total		1	<u>.</u>	<u> </u>	<u> </u>	<u> </u>			0.		0.			0
•	tinuation sheets to Part V	II. Section A					•		0.		0.			0
d Total (add lines		,					\blacktriangleright		0.		0.			0
	f individuals (including but i	not limited to th	nose	liste	ed al	bove	e) wł	no re	eceived more than \$100	0,000 of reportable	е			
											ı		Yes	N
•	ation list any former officer			e, ke	ey er	nplo	yee	, or	highest compensated e	mployee on				X
	" complete Schedule J for and listed on line 1a, is the s							d -+1	har aamnanaatiaa fram	the ergonization		3		
•	anizations greater than \$15									the organization		4	1	Х
-	isted on line 1a receive or									Idual for services				
	organization? If "Yes," con	-				_						5		X
ection B. Independ														
•	able for your five highest co										pens	atıon fı	rom	
the organization	n. Report compensation for (A)	the calendar y	ear	ena	ng v	AILU	OI W	7111111	(B)	year.		(C	:)	
	Name and business	s address	N	ON	E				Description of	services	С	omper		ı
		· · · · ·						Ī						
	• • •							\dashv						_
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			·											
					• • •	-	-					-	•	
		· · · · · · · · · · · · · · · · · · ·												_
								l		ļ				
	f independent contractors mpensation from the organ		not I	ımıte	ed to		se li	stec	d above) who received r	nore than				

. 4		***	Check if Schedule O conta		to any question in	this Part VIII			
			Officer if Generatie O Conta	ans a response		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ıts	1	а	Federated campaigns	1a					
ira			Membership dues	1b			•		
ا ۾ ي			Fundraising events	1c					
ar,			Related organizations	1d					
S, E			Government grants (contributi						
ioi			All other contributions, gifts, grant	· · · · · · · · · · · · · · · · · · ·					
but			similar amounts not included above		87590.				
ğ			Noncash contributions included in lines						
Contributions, Gifts, Grants and Other Similar Amounts		_	Total. Add lines 1a-1f			87590.			
					Business Code				
ငဓ	2	а							
ervi Ie		b						· · · · · · · · · · · · · · · · · · ·	
n St ent		C							
Program Service Revenue		d							-
5		e	 						
۵		f	All other program service reve	nue					
		g	Total. Add lines 2a-2f	-	<u> </u>				
	3		Investment income (including	dıvidends, ıntere	est, and				
			other similar amounts)		.				
	4		Income from investment of tax	k-exempt bond p	roceeds -				
	5		Royalties		•				
				(i) Real	(ii) Personal				
	6	а	Gross rents						
		b	Less: rental expenses						
		C	Rental income or (loss)		L				
			Net rental income or (loss)		•				
	7	а	Gross amount from sales of	(ı) Securities	(II) Other				
			assets other than inventory						
		b	Less: cost or other basis						
			and sales expenses						
		_	Gain or (loss)	L	—				
	_	d	Net gain or (loss)						
Ē	8	а	Gross income from fundraising	•					
Other Reven			including \$	of	1				
æ			contributions reported on line Part IV, line 18	•					
亨			Less: direct expenses	a b					
δ			Net income or (loss) from fund						
	ہ ا		Gross income from gaming ac	-					
		a	Part IV, line 19	a a					
		h	Less: direct expenses	b					
	l		Net income or (loss) from garr		—		ĺ		1
	10		Gross sales of inventory, less	~					
	'	_	and allowances	а					
		Ь	Less: cost of goods sold	b					
			Net income or (loss) from sale	_	•		[]
			Miscellaneous Revenu		Business Code				
	11	а					<u> </u>		
		b							
		c							
		d	All other revenue						
		е	Total. Add lines 11a-11d		>				
	12		Total revenue. See instructions			87590.	0.	0	. 0.
2320 12-10	09 0-12								Form 990 (2012)

Part IX Statement of Functional	Expenses
---------------------------------	-----------------

Section	on 501(c)(3) and 501(c)(4) organizations must comp			omplete column (A).	
	Check if Schedule O contains a respon	se to any question in the	IS Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	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				
2	Grants and other assistance to individuals in		0555		
	the United States. See Part IV, line 22	8555.	8555.		······
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	01016	01016		
	United States. See Part IV, lines 15 and 16	81916.	81916.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				_
7	Other salaries and wages				
8	Pension plan accruals and contributions (include	7000		7200	
	section 401(k) and 403(b) employer contributions)	7200.		7200.	
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				-
b	Legal .	0055		2055	
С	Accounting	2055.		2055.	
d	Lobbying		······································		
е	Professional fundraising services. See Part IV, line 17				· - · · · · · · · · · · · · · · · · · ·
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 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				· -
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0)				
а	Office Expense	218.		218.	
b	Wire Transfer Fees	165.		165.	
c	Legal	61.		61.	
d		_			
e	All other expenses	438.		438.	
25	Total functional expenses. Add lines 1 through 24e	100608.	90471.	10137.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)		<u> </u>		_
					Earm QQ () (2012)

art X	Balance Sheet			
	Check if Schedule O contains a response to any question in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	23121.	1	10103
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
•	trustees, key employees, and highest compensated employees. Complete		1	
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
"	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
			7	
'	Notes and loans receivable, net .		8	
8	Inventories for sale or use	·	9	
9	Prepaid expenses and deferred charges			
10				
1.	basis. Complete Part VI of Schedule D			
	b Less: accumulated depreciation 10b		10c	· · · ·
11	Investments - publicly traded securities		11	
12	Investments - other securities. See Part IV, line 11		12	
13	Investments · program-related. See Part IV, line 11		13	
14	Intangible assets		14	· <u>-</u>
15	Other assets. See Part IV, line 11	22121	15	10102
16	Total assets. Add lines 1 through 15 (must equal line 34)	23121.	16	10103
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue .		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons.			
	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D		25	
26	Total liabilities. Add lines 17 through 25	0.	26	0
	Organizations that follow SFAS 117 (ASC 958), check here ▶			
	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets		27	
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
27 28 29 30 31 32	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ X			
	and complete lines 30 through 34.			
30		0.	30	0
31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0
32	_	23121.	32	10103
33		23121.	33	10103
		23121.	34	10103

Form	990 (2012) Church Planting International, Inc.	59-3493	3819	Pag	e 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>875</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2		006	
3	Revenue less expenses. Subtract line 2 from line 1	3		130	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		231	21.
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		101	03.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	-			
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
•	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	= O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			*****
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
h	Were the organization's financial statements audited by an independent accountant?		2b		Х
U	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	te basis.			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t	he audit	1		
C		ne addit,	2c		1
	review, or compilation of its financial statements and selection of an independent accountant?	nodulo O			
_	If the organization changed either its oversight process or selection process during the tax year, explain in Sci				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ingle Audit	1 2-		х
	Act and OMB Circular A-133?		3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the req	uired audit			

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Church Planting International, Inc.

Employer identification number

			Planting int						5	9-3493	<u>819</u>	
Part I	Reason 1	or Public Char	ity Status (All organiza	ations mus	t complet	e this part	.) See inst	ructions.				
he orga	anization is not a	private foundation	because it is: (For lines 1	through 1	1, check o	only one b	ox.)					
1 🗀	A church, cor	vention of churche	s, or association of churc	hes descr	ibed in se	ction 170	(b)(1)(A)(i)					
2	A school desc	cribed in section 17	' 0(b)(1)(A)(ii). (Attach Scl	nedule E.)								
з 🗀	7		tal service organization of	-	n section	170(b)(1)(A)(iii).					
4	- '		operated in conjunction					(b)(1)(A)(iii). Enter t	he hospital	's nam	ie,
	city, and state		,						•	•		
5	¬ ·		benefit of a college or un	iversity ov	vned or op	erated by	a governr	nental unit	describe	ed in		
• —	_	b)(1)(A)(iv). (Comple		,			_ 3					
6	7		ent or governmental unit	described	l in sectio	n 170(b)(1	\ (Δ)(ω).					
7	-	•	eives a substantial part o					r from the	general r	nublic desc	ribed i	n
		b)(1)(A)(vi). (Comple		or no oupp	on monitu	9010111110			901101011	500.10 0000		••
8 🗆	7		section 170(b)(1)(A)(vi). (Complete	Part II)							
9 X	¬ ·		eives: (1) more than 33 1	-	•	rom contril	outions m	embershir	n fees ar	nd aross rea	eints	from
9	•		nctions - subject to certa							-		
			axable income (less sect									
		509(a)(2). (Complete	•	ion o i i ta	x, 110111 bu.	311103303 0	oquiled b	y the Orga	inzation e	aiter durie d	0, 107	0.
10 🗀	-		perated exclusively to tes	et for publi	c safety S	ee sectio	n 509/a)/4	1)				
11 🗀	7		perated exclusively for the						out the	nurnoses o	f one	or
••	-	•	ations described in section		-			_				OI .
	-		organization and comple				.,. Occ Sec		3)(0). One	SCK THE DOX	tiiat	
	a Type I	· · · · · · · · · · · · · · · · · · ·		pe III - Fur	_		d	I Typ	e III - Nor	n-functional	v inter	arated
_	_		at the organization is not	•	-	•						-
e			han one or more publicly									
									(a)(1) O1 :	Section 308	(a)(z).	
f	_		tten determination from t	ne ino ina	шивату	рет, туре	ii, or Type	3 111				
_		ganization, check to				f========	ad als a dall.		2			ш
9			organization accepted an								Yes	N ₁
			lirectly controls, either al	one or toge	etner with	persons o	escribed	n (II) and (I	iii) below,		res	No
	-		upported organization?							11g(i)	-	\vdash
	• •	•	n described in (i) above?							11g(ii)		\vdash
		•	person described in (i) o							11g(iii)		<u> </u>
h	Provide the to	ollowing information	about the supported org	ganization((S).							
			Ī	h		() B. (4.4 . 41	(vi) Is	tho I			
٠.	ne of supported	(ii) EIN	(lii) Type of organization	in col (i) lis		(v) Did you organizati		organizatio	on in cot	(vii) Amount		netary
01	rganization			governing				(i) organiz U S	ed in the	sup	port	
			(see instructions))	Yes	No	Yes	No	Yes	No			
Refo	rmed			· • • •		. 55						
	rmed byterian		CHURCH		х	х		[x		283	26.
	e Vieira				<i>1</i> \	A .		-	_ ^		203	20.
			MISSIONARY		х	х		x			95	55.
	eorge P	50-1033304	PITOSIONAKI		^_	^		-^ -			65	<u> </u>
		14 1222502	MICCIONADY		v	v		v			240	E 2
		14-1322303	MISSIONARY		Х	X		Х			240	53.
	r Aid		AID]	v	v					200	0.2
rroj	ects		ORGANIZATION		Х	X		ļ	X		209	82.
								1				
_			3					ļ	 			
			2	ł	t .	1	3	4	r 1			

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

Schedule A (Form 990 or 990-EZ) 2012

81916.

232021 12-04-12

Pa	rt II Support Schedule for	_					-
	(Complete only if you checke fails to qualify under the tests				on failed to qualify	under Part III. If the	organization
Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
_	include any "unusual grants.")						<u> </u>
2	Tax revenues levied for the organ-						
	residual instruction is selected 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	<u> </u>			-	1	
4	Total. Add lines 1 through 3	<u> </u>					
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)						
	**	***************************************				· · · · · · · · · · · · · · · · · · ·	
	Public support. Subtract line 5 from line 4 ction B. Total Support	<u></u>	1	<u> </u>	1		
_	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	(a) 2000	(0) 2009	(0) 2010	(0) 2011	(6) 2012	(i) Total
8	Gross income from interest,						
U	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
9	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			 			
	Gross receipts from related activities	etc (see instruct	ions)	·Ł		12	1
	First five years. If the Form 990 is for			rd fourth or fifth:	tax vear as a secti	•	
	organization, check this box and sto		o mot, cocoma, un	ro, roorar, or mar	tax your as a soon	011 00 1 (0)(0)	ightharpoons
Se	ction C. Computation of Pub		rcentage				<u> </u>
14	Public support percentage for 2012			column (fl)		14	%
15	Public support percentage from 201		•	· · · · · · · · · · · · · · · · · · ·	·	15	%
168	33 1/3% support test - 2012. If the	•	•	on line 13, and line	e 14 is 33 1/3% or	more, check this be	ox and
	stop here. The organization qualifies	_					ightharpoons
ŀ	33 1/3% support test - 2011. If the		=		d line 15 is 33 1/3	% or more, check t	his box
	and stop here. The organization qua						▶□
178	10% -facts-and-circumstances tes	st - 2012. If the org	ganization did not	check a box on lir	ne 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fai						
	meets the "facts-and-circumstances"			-	•	3	ightharpoons
ı	10% -facts-and-circumstances tes	•	•		-	17a, and line 15 is	10% or
	more, and if the organization meets t						
	organization meets the "facts-and-cir	cumstances" test.	The organization	qualifies as a pub	olicly supported org	ganization	▶ □
18	Private foundation. If the organization	on did not check a	box on line 13, 10	6a, 16b, 17a, or 17	7b, check this box	and see instruction	ns 🕨 🔲

Schedule A (Form 990 or 990-EZ) 2012

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.)

Sec	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not			İ					
	include any "unusual grants.")	99297.	92636.	105112.	102423.	87590.	487058.		
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								
3	Gross receipts from activities that								
	are not an unrelated trade or bus- iness under section 513								
4	Tax revenues levied for the organ-								
	ızation's benefit and either paid to or expended on its behalf								
5	The value of services or facilities furnished by a governmental unit to the organization without charge								
6	Total. Add lines 1 through 5	99297.	92636.	105112.	102423.	87590.	487058.		
7 a	Amounts included on lines 1, 2, and								
	3 received from disqualified persons						0.		
t	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.		
(Add lines 7a and 7b						0.		
8	Public support (Subtract line 7c from line 6)						487058.		
	ction B. Total Support								
	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total		
9	Amounts from line 6	99297.	92636.	105112.	102423.	87590.	487058.		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources								
t	Unrelated business taxable income				-				
	(less section 511 taxes) from businesses								
	acquired after June 30, 1975								
	Add lines 10a and 10b		7 11-17						
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 (Explain in Part IV.)								
13	Total support. (Add lines 9, 10c, 11, and 12)	99297.	92636.	105112.	102423.	87590.	487058.		
14	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3) organiz	ation,		
	check this box and stop here						▶		
Se	ction C. Computation of Publ	ic Support Per	rcentage						
15	Public support percentage for 2012 (line 8, column (f) d	ivided by line 13, c	olumn (f))			100.00 %		
16	Public support percentage from 2011	Schedule A, Part	III, line 15			16	100.00 %		
Se	ction D. Computation of Inve	stment Incom	e Percentage						
17	Investment income percentage for 20)12 (line 10c, colur	nn (f) divided by lin	e 13, column (f))		17	.00 %		
18	Investment income percentage from	2011 Schedule A,	Part III, line 17			18	%		
19	a 33 1/3% support tests - 2012. If the	organization did n	ot check the box	on line 14, and line	15 is more than 3	3 1/3%, and line 1	7 is not		
	more than 33 1/3%, check this box a						$\triangleright X$		
(b 33 1/3% support tests - 2011. If the						and		
	line 18 is not more than 33 1/3%, che								
20	Private foundation. If the organization						▶		
	223 12-04-12						0 or 990-EZ) 2012		

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,

Part IV, line 14b, 15, or 16.

► Attach to Form 990. See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	-		_				•
	<u>rch Planting</u>					59-349381	
Par			ctivities Out	side the United States. Comple	ete if the organ	ızatıon answered "Y	es"
	to Form 990, Part						
1				ds to substantiate the amount of its gr			Yes X No
	the grantees' eligibility to	or the grants or a	issistance, and	the selection criteria used to award the	grants or assi	stance:	165 [22] 110
2	For grantmakers, Desc	ribe in Part V the	organization's i	procedures for monitoring the use of it	s grants and of	ther assistance outs	ide the
_	United States.				J		
3	Activities per Region. (Ti	he following Part	i, line 3 table ca	n be duplicated if additional space is	needed.)		
	(a) Region	(b) Number of offices	(c) Number of employees.	(d) Activities conducted in region (by type) (e.g., fundraising, program		vity listed in (d) gram service,	(f) Total expenditures
		in the region	employees, agents, and independent contractors	services, investments, grants to		specific type	for and investments
			contractors in region	recipients located in the region)	of service	ce(s) in region	in region
_			III TEGIOTI				
					The support	of churchs	
						ctivities and	
Afri	ca			Program services	child care		74335.
							_
	······································				1		
					1		
	<u> </u>						
					<u> </u>		-
3 a	Sub-total	- 0	0				74335.
	Total from continuation		<u> </u>			·····	1
_	sheets to Part I		0				0.
c	Totals (add lines 3a						
	and 3b)		<u> </u>		<u> </u>		74335.
LHA	For Paperwork Reduct	tion Act Notice,	see the Instruc	tions for Form 990.		Schedule F (Form 990) 2012

59-3493819 Church Planting International, Inc.

Schedule F (Form 990) 2012

Page 2

Part it 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.

(i) Method of valuation (book, FMV appraisal, other)	Book				
(h) Description of non-cash assistance					
(g) Amount of non-cash assistance	*0				cempt by
(f) Manner of cash disbursement	Personal cash				recognized as tax-e.
(e) Amount of cash grant	•0				foreign country,
(d) Purpose of grant	Church activities and child care				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
(c) Region	Africa				ns listed above that are r Il has provided a section
(b) IRS code section and EIN (if applicable)					ecipient organization ne grantee or counse
1 (a) Name of organization					2 Enter total number of r the IRS, or for which th

Schedule F (Form 990) 2012

3 Enter total number of other organizations or entitles

21

Church Planting International, Inc.

59-3493819

Page 3

Schedule F (Form 990) 2012 Church Planting International, Inc. 59–3493819

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.

(a) Type of grant or assistance (b) Region	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
						•	
						Schedu	Schedule F (Form 990) 2012

"Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions

Schedule F (Form 990) 2012

Yes X No

for Form 5713)

Part V Supplemental Information	39-3493	0019	Page 5
Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3,	column (f) (ac	counting m	nethod:
amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (account			
(c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information of the complete this part to provide any additional information.			00.011
Schedule F, Part I, Line 2: Personal disbursement of funds	<u>with re</u>	ceipt	<u>s</u>
to manipus shoughs			
to various churchs.			
Schedule F, Part I, Line 3: Records and receipts maintained	of		
disbursements			
			
			
 	 		
			
			_

% × Schedule I (Form 990) (2012) **Employer identification number** 59-3493819 OMB No 1545-0047 2012 Open to Public Inspection (h) Purpose of grant or assistance ☐ Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 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 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Church Planting International, Inc. (c) IRC section if applicable LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table Part | General Information on Grants and Assistance (P) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) H 1#Bd

Page 2 Schedule I (Form 990) (2012) (f) Description of non-cash assistance 59-3493819 Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) 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. (d) Amount of non-cash assistance °. Church Planting International, Inc. 8555. 26 (c) Amount of cash grant (b) Number of recipients Dr Jamie T Vieria Ministry - Ministry support (a) Type of grant or assistance Schedule I (Form 990) (2012)

Part III | Grants and Other

232102 12-18-12

, SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► 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.

OMB No 1545-0047 Open To Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization						_	-	identi		n nu	mber
	Planting I					59	<u> -34</u>	938	19		
Part I Excess Benefit Tran											
Complete if the organization				. 1	o, or Form 990-EZ, P	art V, li	ine 40	b.	1		
(a) Name of disqualified person	(b) Relationship bet		•	ified (c) Description of tran	sactio	n			-	cted?
	person and o	rganiza	ition						Ye	s	No
											_
				- 					+		
									-		
									1		
	· · · -							<u>-</u>	1		
2 Enter the amount of tax incurred b	y the organization mar	nagers	or disc	ualified persons dur	ing the year under						
section 4958		•				ı	> \$				
3 Enter the amount of tax, if any, on	line 2, above, reimbur	sed by	the org	ganization .			▶ \$		_		
Part II Loans to and/or Fro	m Interested Per	rsons.	•								
Complete if the organization	on answered "Yes" on	Form 9	90-EZ	, Part V, line 38a or F	Form 990, Part IV, lin	ie 26; d	or If th	ie orga	nızatı	on	
reported an amount on Fo	- 1 ! <i>[</i>					1	_	(h) App	rovad		
Interested person	of loan		an to or	(e) Original principal amount	(f) Balance due	by l		by boa	oard or		ritten ment?
organiz	ation		zation?	principal amount				comm			·
		То	From			Yes	No	Yes	No	Yes	No
		-				 					
		+									
		 				-		 			
		+									 -
		1									
		1									
Total				▶ \$							
Part III Grants or Assistance	e Benefiting Inte	reste	d Pei	rsons.							
Complete if the organization	on answered "Yes" on	Form 9	90, Pa	art IV, line 27.							
(a) Name of interested person	(b) Relationship			(c) Amount of	(d) Type				Purp		f
	interested per the organiz		d	assistance	assistan	ce		•	assista	ince	
Don Dr. Coorse D. Hute				2405	2 0224 222		b	·	·		:
Rev Dr George P Huto	norganizati	LON	con	2405	3.Cash con	tri	DUF	ore	ıgn	mı	SSI
					_						
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See Part V for Continuations

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

Schedule L (Form 990 or 990-EZ) 2012

Complete if the organization answere	d "Yes" on Form 990, Part IV, line 28a, 2	8b, or 28c.		T / \ -:-	
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	zatior
	-			Yes	N
			·		
				<u> </u>	-
-					
		-			
				1	-
Supplemental Information Complete this part to provide addition	al information for responses to question	ns on Schedule L (see	instructions).		
h L, Part III, Grants o	r Assistance Benefit	ting Intere	ested Persor	ıs:	
a) Name of Person: Rev D	r George P Hutchinso	n			
) Relationship Between	Interested Person an	d Organizat	cion:		
rganization contributes	to Dr Hutchinson's M	inistry.			
c) Amount of Grant \$ 24	053.				
d) Type of Assistance: C	ash contributions of	24053. Di	Hutchinson	don	at
486 to CPI this year					
e) Purpose of Assistance	: Foreign mission su	pport			
				 	_
					

VSCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

OMB No 1545-0047

Employer identification number

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.

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	Church Planti	ing Internation	nal, Inc	59-3493819
Form 990, Part	III, Line 4d,	Other Program	Services:	
Support of Worl	kers Children I	Fund - Uganda,	Africa	
Expenses \$ 0.	including gra	ants of \$ 0.	Revenue \$ 0.	
Support of Ugan	nda Child Aid,	Africa		
Expenses \$ 0.	including gra	ants of \$ 3122	8. Revenue \$	0.
Other Projects				
Expenses \$ 0.	including gra	ants of \$ 0.	Revenue \$ 0.	
Form 990, Part	VI, Section A	, line 2: Dr H	utchinson's wif	fe, Linda, is the
paid bookkeepe	r			
		, line ll: For	m 990 provided	to Annual Board
of Director's	Meeting.			
Form 990, Part	VI, Section C	, Line 19:		
			· .	