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INED JUN 27 2013

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2012

Open to Public Inspection

A	For the	2012 cale	endar year, or tax year beginning January 1 , 2012, and endin	g Decer	nber 31	, 20 12	
В	Check if	applicable:	C Name of organization Adventive Cross Cultural Initiatives		D Employ	er identification nu	ımber
	Address	change	Doing Business As			72-1588721	
	Name ch	nange	Number and street (or PO box if mail is not delivered to street address) Room/sui	te	E Telepho	ne number	
	Initial ret	urn	141 East Main Street			704-607-5029	
	Terminat	ted	City, town or post office, state, and ZIP code			701 007 0020	
	Amende	d return	Rock Hill, SC 29730-4539		G Gross re	eceipts \$	250484
$\bar{\Box}$	Applicati	on pending		H(a) is this		for affiliates? Yes	
	• •				ll affiliates ii	_	_
$\overline{}$	Tax-exer	mpt status	√ 501(c)(3) √ (insert no) √ 4947(a)(1) or √ 527	_ ` ` `		a list (see instruction	
J	Website		w.adventive.ca	H(c) Groun	a exemptio	n number ▶	
K	Form of o		✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formati			of legal domicile	MN
Р	art I	Summ		2004		or logar dominono	14114
	1		escribe the organization's mission or most significant activities. Advent	ive Cross C	dtural Ini	tiatives ("ACCI")	rocruite
_			ho are seeking to serve the Lord Jesus through cross-cultural Christian mis				
Activities & Governance			called them. ACCI's activities include evangelism, church planting and sup				
'n	1		o existing ministries throughout the world.	Pois Piagra	<u></u>	services, and ge	iiciai
ě	2		nis box ▶☐ if the organization discontinued its operations or disposed o	of more than	25% of	its net assets	····
Ğ	3		of voting members of the governing body (Part VI, line 1a)		3		
Š	4		of independent voting members of the governing body (Part VI, line 1b)				5
ij	5		mber of individuals employed in calendar year 2012 (Part V, line 2a)		5		
ξį	6		mber of volunteers (estimate if necessary)		6		
ĕ	7a		related business revenue from Part VIII, column (C), line 12		7a	<u>. </u>	6
	Ь		elated business taxable income from Form 990-T, line 34		7b		0
	 		increase in the same in our return of the order of the or	Prior Ye		Current Ye	o ear
Revenue	8	Contribut	itions and grants (Part VIII, line 1h)				
	9		service revenue (Part VIII, line 2g)		271191		250409
Š	10	_	ent income (Part VIII, column (A), lines 3, 4, and 7d)		0		
æ	1				0		
	12	Total reve	venue (Part VIII, column (A), lines 5, 6d -8c, 9c, 10c, and 11e) enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		75		75
_	13		nd similar amounts paid (Part IX, column (A), lines 1=3) (271266		250484
	14		paid to or for members (Part IV columns(A) line 4)		38501		48818
	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)		0		
Expenses	16a		onal fundraising fees (Part IX, column (A), line 1-1e)		0		
Je L	b				U SA MARK		U
X	17		penses (Part IX, column (Q), lines 11a-11d, 11f-24e) 1248		245405		200400
	18		penses, Add lines 13–17 (must equal Part IX, column (A), line 25)		215495		202492
	19		e less expenses Subtract line 18 from line 12		253996		251310
- S		rtevenue		Beginning of Cu	17270	End of Yea	-826
o sts	20	Total acc	sets (Part X, line 16)			End of Tea	
Asse	21		pilities (Part X, line 26)		33393		32567
Net Assets	22		ets or fund balances. Subtract line 21 from line 20	· · ·-	22202	_	
	artil		ture Block		33393		<u>32567</u>
			ury, I declare that I have examined this return, including accompanying schedules and stater	mente and to t	he best of r	my knowledge and	bolief it is
tru	e, correct	t, and comp	elete Declaration of preparer (other than officer) is based on all information of which preparer	has any knowl	edge	ny knowledge and	Dellei, it is
			Is sale		51.	117	
Sig	n	Sign	ature of officer			(112	
He	_	1	John E. Haley, President/Executive Director		Ma	14 743	
		Type	e or print name and title		7 120	14, 2013	
_		1.7	/pe preparer's name Preparer's signature Da	te		PTIN	
Pa		-			Check self-em	□	
	epare	1	name •	T _{F.} _			
US	se Onl		address >		n's EIN ▶		
Ma	v the IF		s this return with the preparer shown above? (see instructions)	Pnc	ne no	V _{ac}	□No
_	<u> </u>			o 11282Y	• •		90 (2012)
				- 112021		1011110	(2012)

	000	(2012)	
-orm	990	(2012)	

Part	
	Check if Schedule O contains a response to any question in this Part III
1'	Briefly describe the organization's mission:
	Adventive Cross Cultural Initiatives ("ACCI") recruits people who are seeking to serve the Lord Jesus through cross-cultural Christian
	missions activities and equips those people to serve out that calling, and assists other Christian ministries as they seek to advance the Gospel of Christ around the world.
	auvance die Gospei of Citrist afound die World.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
	the total expenses, and revenue, if any, for each program service reported.
	(Code:) (Expenses \$ 177860 including grants of \$ 0) (Revenue \$ 0)
74	(Jode:) (Expenses #
	ACCI sends contracted missionaries to proclaim the good news of salvation in Jesus throughout the world. These missionaries are
	in many countries, and perform a variety of activities, including evangelism, church planting and support, practical community
	help and relief, training and discipleship, etc. Many of the missionaries work with other like-minded organizations in their area of
	service. ACCI contracted with 38 such missionaries who ministered in 14 countries.
	(Code) \/\(\Gamma\) \/\(\Gamma\)
4b	(Code:) (Expenses \$ 48818 including grants of \$ 48818) (Revenue \$ 0)
	ACCI works with other organizations to advance the Gospel of Christ throughout the world. Some of those organizations have bases of operations in countries where ACCI contracted missionaries serve, and some are local organizations that work in conjunction
	with ACCI contracted missionaries on common goals or projects. in 2012, ACCI provided counsel and some funding to
	3 organizations that ministered in 3 different countries.
	
	•
4c	(Code:) (Expenses \$
70	ACCI provides spirtual support and encouragement to the missionaries that it contracts with around the world. In 2012, ACCI
	provided such support through ongoing prayer and mentoring, some assistance with donor communications, practical planning,
	and strategic advice, all via Skype, email, telephone calls, and where fiscally possible, personal visits with the missionaries.
	Other program services (Describe in Schodula O.)
4d	Other program services (Describe in Schedule O.) (Expenses \$ N/A including grants of \$ N/A) (Revenue \$ N/A)
4e	Total program service expenses ► 241693

Part I	V Checklist of Required Schedules			
			Yes	No
1'	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1_	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2_	✓	
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		✓
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		✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	l		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_	i	1
_		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			/
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		 •
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		<u> </u>	-
	complete Schedule D, Part III	8		/
	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a	۰		
	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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	<u> </u>		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	>0.55°		
	VII, VIII, IX, or X as applicable.	<u>'</u>		
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Ĺ	✓
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		✓
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			,
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11c		✓
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			<u> </u>
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			1
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		*
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓_
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	445	1	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	14b	_	-
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	1	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	ٿ	-	
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
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		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
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		✓
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		√
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		✓
		Forr	n ササリ	(2012)

Part I	V 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		✓
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		✓
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		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	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	24d 25a		√
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	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	26		1
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 III	27		1
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):		# 1	i same i il
a b	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	28a 28b	✓	✓
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	✓	
29 30	Did the organization receive more than \$25,000 in non-cash contributions? 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 M	29 30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<i>y</i>
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		√
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		√
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		· ·
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		V
b	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, line 2	35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
38	Part VI	37		✓
	19? Note. All Form 990 filers are required to complete Schedule O	38	√ 200	(2012)

Form **990** (2012)

Part	- ,			_
	Check if Schedule O contains a response to any question in this Part V	<u> </u>	· ·	
1a	Enter the number reported in Rev 2 of Form 1006 Enter 0, if not applicable		Yes	No
b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
C	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
•	reportable gaming (gambling) winnings to prize winners?	1c	√	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
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			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		~= 	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
L	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓_
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	۱ . ا		
7	Organizations that may receive deductible contributions under section 170(c).	6b		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
_	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	75		
	required to file Form 8282?	7c		1
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		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
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		
_ b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	.	1	
a b	Initiation fees and capital contributions included on Part VIII, line 12	.		
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	.		
b	Gross income from other sources (Do not net amounts due or paid to other sources		-	
	against amounts due or received from them.)	.		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans	. }		
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a]	✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14h		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response to any question in this Part VI	ee ins	struct	ions.			
Secti	on A. Governing Body and Management	<u> </u>	<u> </u>	·			
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.						
ь 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	✓	/			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		 _ _ 			
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1			
6	Did the organization have members or stockholders?	6		1			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
a	The governing body?	8a	✓	ļ. —			
ь 9	Each committee with authority to act on behalf of the governing body?	8b		 -			
the organization's mailing address? If "Yes," provide the names and addresses in Schedule O							
	on Division (Time decision Brioghastic information about policies not required by the internal neven	ue C	Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		1			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	✓				
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					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1				
13	Did the organization have a written whistleblower policy?	13		✓			
14 15	Did the organization have a written document retention and destruction policy?	14		/			
а	The organization's CEO, Executive Director, or top management official	15a		 			
b	Other officers or key employees of the organization	15b		 			
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	.05					
	with a taxable entity during the year?	16a		1			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the						
	organization's exempt status with respect to such arrangements?	16b					
	on C. Disclosure						
17 18	List the states with which a copy of this Form 990 is required to be filed ► None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply	501(c)(3)s	only)			
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict or and financial statements available to the public during the tax year.		•	olicy,			
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: John Haley, 141 East Main Street, Rock Hill, SC 29730, Tel. 704-607-5029	of the	•				

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rom	990	120121	

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

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 no	r any relate	d org	anız			ompe	nsa	ted any currer	t officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for	box, office	unles er and	Pos neck ss pe	rson irect	than on the street that the st	an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	other
	related organizations below dotted line)		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) Justin Arnot, Director, Secretary	1.0	1		√				0	0	
(2) John Haley, Director, President, Exec. Direc	25.0	1		1				0	0	
(3) Mark Peterkins, Director	1.0	1		,				0	0	
(4) Ken Roth, Director	1.0	1						0	0	
(5) David Willcock, Director, Treasurer	1.0	1		1				0		
(6)										
(7)						-				
(8)								-		
(9)			_							
(10)					_					
(11)			-							
(12)										
(13)			-							
(14)										

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd F	lighe	st C	ompensated E	mployees (contin	ued)		
•	(A) Name and title	(B) Average hours per	box, office	unles	Pos neck is pe	rson	e than o is both or/trus:	an	(D) Reportable compensation	(E) Reportab compensation		Est am	(F) mated ount of	
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatio (W-2/1099-N		comp fro orga and	ther ensatio m the nization related nizations	1
(15)													**	
(16)										_				
(17)														_
(18)														
(19)								-						
(20)									-		-			
(21)				_										
(22)									-					
(23)														
(24)														
(25)														
1b c d	Sub-total Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Sectio			· ·		•	> > >	0		0			0
2	Total number of individuals (including but reportable compensation from the organi	not limited			e list	ed	above	e) w	<u> </u>	ore than \$1		0 of		
3	Did the organization list any former of employee on line 1a? <i>If</i> "Yes," complete 3	ficer, direc										d	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of reparted the	portal an \$1	ole (150,	con	npei	nsatic f "Ye	n a s,"	nd other comp complete Sch	ensation fr	om th	e		▼
5	Did any person listed on line 1a receive of for services rendered to the organization?													√
Section	on B. Independent Contractors												!	
1	Complete this table for your five highest of compensation from the organization. Repyear.													ax
	(A) Name and business add	ress							(B) Description of s	ervices		(C) Compens	sation	
None								N/A	A					0
2	Total number of independent contractor received more than \$100,000 of compens							o th	ose listed abo	ove) who				

Part	VIII	Statement of Revenue					
		Check if Schedule O contains a response to a	ny quest				
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns 1a	0				
ira our	b	Membership dues 1b	0				
S, E	С	Fundraising events 1c	0				
Sift lar	d	Related organizations 1d	0				
S, E	е	Government grants (contributions) 1e	0				
r Si	f	All other contributions, gifts, grants,					
₽ E		and similar amounts not included above 1f	250409				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f. \$	0				
	h	Total. Add lines 1a-1f	. ▶	250409			
E		Busines	s Code				
Ver	2a					_	_
<u>~</u>	b						
ξi	С						
Ser	d						
Ę	е						
Program Service Revenue	f	All other program service revenue .		0			
<u>~</u> _	9	Total. Add lines 2a–2f	. ▶				
	3	Investment income (including dividends, in and other similar amounts)					
		,	`. ▶				
	4	Income from investment of tax-exempt bond proce	eas►	_		_	
	5	Royalties	Conal				
	60		301101	j ~		\$***	
	6a b	Gross rents Less: rental expenses					
	C	Rental income or (loss)					
	ď	Net rental income or (loss)	. •				
	7a	Gross amount from sales of (i) Secunties (ii) Of					8 .
		assets other than inventory			~		*
	ь	Less: cost or other basis		1			
		and sales expenses .					
	С	Gain or (loss)		}			
	d	Net gain or (loss)	. ▶				
anc	8a	Gross income from fundraising					
	•-	events (not including \$					
ě		of contributions reported on line 1c).					
Other Reve		See Part IV, line 18 a	-				
¥	b	Less: direct expenses b		ŀ			
•	С	Net income or (loss) from fundraising events	. •				
	9a	Gross income from gaming activities.					
		See Part IV, line 19 a					
	b	Less: direct expenses b					
	С	Net income or (loss) from gaming activities .	. ▶				
	10a	Gross sales of inventory, less					
		returns and allowances a					
	b	Less: cost of goods sold b					
	C	Net income or (loss) from sales of inventory .					
		Miscellaneous Revenue Busines			······································		
	11a	Application processing fees 9000	99	75			
	b						
	C	All other revenue					
	d	All other revenue	. •				
	12	Total revenue. See instructions		75 250484			
				230484		1	ı

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must con			ns must complete co	lumn (A).
	Check if Schedule O contains a respon	se to any question	ın this Part IX		
	et include amounts reported on lines 6b, 7b, o, 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	0	0		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	0	0		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	48818	48818		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
	trustees, and key employees	0	0	o	0
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	0	0	0	0
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	0	0		0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	0	0	0	0
11	Fees for services (non-employees): Management		ļ		
a	-	0	0	0	0
b	Legal	0	0	0	0
d	Lobbying	5705	0	5705	0
e	Professional fundraising services. See Part IV, line 17	0	0	0	0
f	Investment management fees	0		0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column				0
3	(A) amount, list line 11g expenses on Schedule O.)	192225	192225	o	•
12	Advertising and promotion	0	0	0	
13	Office expenses	1153	0	1153	
14	Information technology	0	0	0	
15	Royalties	0	0	0	
16	Occupancy	0	0	0	0
17	Travel	650	650	0	
18	Payments of travel or entertainment expenses				<u>-</u>
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	0	0	0	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	0	0	. 0	0
23	Insurance	1458	. 0	1458	0
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column	Ì			
	(A) amount, list line 24e expenses on Schedule O.)	ŀ			i I
а	PayPal credit card processing fees	1240	o		
b	Panavalanca	1248 53	0	53	1248
c				53	0
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	251310	241693	8369	1248
26	Joint costs. Complete this line only if the				1240
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here	į			
	following SOP 98-2 (ASC 958-720)				

<u> </u>	art X				
		Check if Schedule O contains a response to any question in this Par	<u>rt X</u>	<u> </u>	<u> </u>
	-		(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	33393	1	32567
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors,	,		
		trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L	0	5	
	6	Loans and other receivables from other disqualified persons (as defined under section	ו		
		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			
sts		organizations (see instructions). Complete Part II of Schedule L	·0	6	0
Assets	7	Notes and loans receivable, net	0	7	. 0
Ä	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a	0		
	b	Less: accumulated depreciation 10b		10c	0
	11	Investments—publicly traded securities		11	0
	12	Investments—other securities See Part IV, line 11		12	0
	13	Investments—program-related. See Part IV, line 11	0	_	0
	14	Intangible assets	0		0
	15	Other assets. See Part IV, line 11	0		0
_	16	Total assets. Add lines 1 through 15 (must equal line 34)	33393	$\overline{}$	32567
	17	Accounts payable and accrued expenses	0		0
	18	Grants payable	0		0
	19	Deferred revenue	0		. 0
	20	Tax-exempt bond liabilities	0	 	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
Ē		disqualified persons. Complete Part II of Schedule L		22	
<u>.</u>	23		0	_	0
_	24	Unsecured notes and loans payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties	0		0
	25	Other liabilities (including federal income tax, payables to related third		24	0
	25	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	Ò	25	0
	26	Total liabilities. Add lines 17 through 25	0		0
_			nd		
es		complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	33393	27	32567
3al	28	Temporarily restricted net assets	0	 	0
ā	29	Permanently restricted net assets	0		0
ڄ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ an			
Ϋ́		complete lines 30 through 34.			
ts (30	Capital stock or trust principal, or current funds	0	30	0
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund	0	_	0
As	32	Retained earnings, endowment, accumulated income, or other funds	0		0
Š	33	Total net assets or fund balances	33393	33	32567
_	34	Total liabilities and net assets/fund balances	33393	34	32567

Form 9	90 (2012)			Pa	ge 12
Par		-			ge 12
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	111	_ <u>. </u>		<u></u> 50484
2	Total expenses (must equal Part IX, column (A), line 25)	2			51310
3	Revenue less expenses. Subtract line 2 from line 1	3			-826
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			33393
5	Net unrealized gains (losses) on investments	5		'	33333 0
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			22567
Par	XII Financial Statements and Reporting	1 10			<u>32567</u>
i di	Check if Schedule O contains a response to any question in this Part XII				
	Oncord in concedure of contains a response to any question in this rait XII	• • • •		Yes	No.
1	Accounting method used to prepare the Form 990. 🗸 Cash 🔲 Accrual 🔲 Other			163	140
•	If the organization changed its method of accounting from a prior year or checked "Other," ex	nlaın ın			
	Schedule O.	piani iii			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		1
20	If "Yes," check a box below to indicate whether the financial statements for the year were com		Za		_
	reviewed on a separate basis, consolidated basis, or both:	phed of			
	Separate basis Consolidated basis Both consolidated and separate basis			1	
_	·				
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.		2b		
	separate basis, consolidated basis, or both:	eu on a			
	'				
_	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account				
	•		2c		1
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	ipiain in			

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

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

the Single Audit Act and OMB Circular A-133?.

Form **990** (2012)

3b

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

2012

Open to Public Inspection

	ntive Cross Cultura									88721 _		
Pai			rity Status (All orga	_				_ <u></u>	nstruction	ons.		
The	_	•	tion because it is: (Fo		_		•	•				
1			hes, or association of			ed in sec	tion 170(b)(1)(A)(i).			
2			170(b)(1)(A)(ii). (Attac		•							
3			spital service organiza						N/ 1/41/A1	//···\ =		
4	_	earch organizatione, city, and state	on operated in conjund	ction with	ı a nospit	ai descrii	oea in se	ction 1/	J(D)(T)(A)	(III). Ente	rtne	
5	·	•	the benefit of a colleg		voreity or	wood or	operated	by 2 00	vornmon	tal unit d	locorib	od in
3)(1)(A)(iv). (Com	· · · · · · · · · · · · · · · · · · ·	ge or um	versity of	Wiled Of	operateu	by a go	venninen	ital unit u	iesti in	eu III
6			nment or government	al unit de	scribed in	section	170/h)/1)(Δ)(υ)				
7			receives a substantia					, , , , ,	ut or fron	n the ge	neral c	ublic
			(A)(vi). (Complete Par				. 90.0			ae ge.		
8			n section 170(b)(1)(A		nplete Pa	ırt II.)						
9			receives: (1) more that		-		om contri	butions.	members	ship fees	and o	aross
			to its exempt funct									
	• •	-	nt income and unrel						n 511 ta	ax) from	busine	esses
		-	fter June 30, 1975. Se					•				
10	_ •	•	operated exclusively		•	•						
11			nd operated exclusive									
	purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.											
_	a Type I b Type II c Type III-Functionally integrated d Type III-Non-functionally integrated											
-	e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1)											
	or section 509	_			- [,		5					(-)(-)
f	If the organiz	ation received a	a written determination	on from	the IRS t	that it is	а Туре	I, Type I	ll, or Typ	pe III su	oportin	ıg
	organization, o	check this box	. 									
9	_		he organization acce	pted any	gift or co	ontributio	n from a	ny of the)			
	following pers											
			ndirectly controls, eith						d ın (ıı) a	nd	Yes	No
			ody of the supported							11g(i	_	
	•		on described in (i) abo							. 11g(ii	1 -	
h		•	a person described in on about the support							. 11g(iii	<u>) </u>	
	Name of supported	(ii) EIN	(iii) Type of organization		organization	(M) Did v	ou notify	(40.1	ls the	(viı) Amou	nt of mo	notan,
(1)	organization	(1) 2111	(described on lines 1-9	in col (i) li	sted in your	the organ	nization in	organizat	tion in col		upport	пссагу
			above or IRC section (see instructions))	governing	document?		of your port?		zed in the S?			
			(See mandener)	Yes	No	Yes	No	Yes	No			
(A)												
~~/ ——									ļ			
(B)												
				-			 	-	-	 		
(C)												
(D)												_
(E)		-		_				 				
(- /												_
Tota												

18

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 Calendar year (or fiscal year beginning in) ▶ (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Gifts, grants, contributions, membership fees received. (Do not include any "unusual grants.") . . . 145333 151874 177400 271191 250409 996207 revenues levied for the organization's benefit and either paid to or expended on its behalf . . . n The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 145333 151874 177400 271191 250409 996207 5 The portion of total contributions by each person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . 89019 Public support. Subtract line 5 from line 4. 907188 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2008 **(b)** 2009 (f) Total (c) 2010 (d) 2011 (e) 2012 Amounts from line 4 7 145333 151874 177400 271191 250409 996207 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 0 0 9 Net income from unrelated business activities, whether or not the business is regularly carried on 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 150 75 75 499 · 🕷 🖫 11 Total support. Add lines 7 through 10 31" 1 41 996706 12 Gross receipts from related activities, etc. (see instructions) 12 0 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f) 14 14 91.0 % 15 Public support percentage from 2011 Schedule A, Part II, line 14 15 86.6 % 331/3% support test -2012. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this \mathbf{V} 331/3% support test-2011. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test-2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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 falls to quality	under the te	sis listed beit	Jw, piease co	ompiete Part	11.)	
	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")						
2	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 business under section 513						
4	Tax revenues levied for the		 				
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities	_			-		
Ŭ	furnished by a governmental unit to the						
	organization without charge		1				
_	= =						
6	Total. Add lines 1 through 5		 				<u> </u>
7a	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	* *****		A. LECUI		e e e e e e e e e e e e e e e e e e e	:
	line 6.)						
	on B. Total Support			, .			
Calen	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	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					<u> </u>	
	loss from the sale of capital assets						
	(Explain in Part IV.)		-				
13	Total support. (Add lines 9, 10c, 11,					·-	
	and 12.)		•				
14	First five years. If the Form 990 is for the	ne organizatio	n's first, secon	d. third. fourth	ı. or fifth tax v	ear as a section	on 501(c)(3)
•	organization, check this box and stop he	-					
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2012 (line			3. column (f))		15	%
16	Public support percentage from 2011 Scl					16	
	on D. Computation of Investment In			<u> </u>	<u> </u>		
17	Investment income percentage for 2012 (y line 13, colu	mn (f))	17	%
18	Investment income percentage from 201			-		18	
19a	331/3% support tests—2012. If the organ						
.54	17 is not more than 331/3%, check this box						•
ь	331/3% support tests—2011. If the organiz					_	_
D	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di	_	_		•		

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
All amount	s list in Part II, Line 10 are application processing fees.
	······································
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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

2012

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Department of the Treasury Internal Revenue Service

Name of the organization **Employer identification number Adventive Cross Cultural Initiatives** 72-1588721 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the ✓ Yes □ No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) if activity listed in (d) is a program service, describe specific type of service(s) in region (d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, (a) Region (b) Number of (c) Number of (f) Total expenditures for offices in the employees, region agents, and independent and investments in region grants to recipients located in the region) contractors in region (1) North America 0 1 **Program Services** See Part V below. 41853 (2) South America 0 4 **Program Services** See Part V below. 5969 (3) East Asia & Pacific 0 Program Services See Part V below. 996 (4) (5) (6)(7) (8) (9) (10)(11)(12)(13)(14) (15) (16)(17)Sub-total 0 10 48818 Total from continuation

0

0

10

sheets to Part I

c Totals (add lines 3a and 3b)

0

488<u>18</u>

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. Part II

Schedule F (Form 990) 2012

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

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

Part III Grants ar

(a) Type of grant or assistance	(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)

Schedule	F (Form	990)	2012

Page	4

Sched	ule F (Form 990) 2012		Page 4
Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	✓ Yes	□ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, 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	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	☐ Yes	✓ No

Part V

Supplemental Information

Complete this part to provide the information 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).

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.

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

Name of the organization **Employer identification number Adventive Cross Cultural Initiatives** 72-1588721 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (b) Relationship between disqualified person and (d) Corrected? 1 (a) Name of disqualified person (c) Description of transaction organization Yes No (1) (2)(3) (4)(5) (6)Enter the amount of tax incurred by the organization managers or disqualified persons during the year 2 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. (b) Relationship (a) Name of interested person (c) Purpose of (d) Loan to or (e) Onginal (f) Balance due (g) In default? (h) Approved (i) Written with organization loan from the principal amount by board or agreement? organization? committee? То From Yes No Yes No Yes No (1) (2)(3)(4)(5)(6)(7)(8) (9)(10)Total Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27,

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

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

' (a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Anthony ("Tony") Hedrick	See Part V below	See Part V below	Payment of contracted services		V
(2) ACCI of Canada	See Part V below	See Part V below	See Part V below		✓
(3)					
(4)					
(5)		_			
(6)					
(7)				1 -	
(8)					
(9)					
(10)				\top	\vdash

Part V Supplemental Information

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

Part IV, Line (1), Columns (b) and (c): Tony Hedrick was a founding member of Adventive Cross Cultural Initiatives ("ACCI") in the US and in Canada. (ACCI-US) and ACCI-Canada are separate organizations, each with an independent board of directors.) Tony served on both boards until October of 2007, and he served as Executive Director and as a missionary with both organizations until October of 2007. Tony currently serves as an ACCI-US contracted missionary, promoting and working with ACCI ministry projects in Canada, England, Norway, Italy and Slovenia. ACCI-US pays Tony for his contracted services based on donations for related projects. In 2012, Tony received \$45,834 from ACCI-US for his work, including a single payment of \$16,757. (All ACCI contracted missionaries, including Tony, receive monthly payments based on project donations for that month.) Part IV, Line (2), Columns (b), (c), and (d): As noted above and in various other parts of the Form 990 and its Schedules ACCI-US and ACCI-Canada share a common history, and cooperate together in many ways, including combined ministry objectives and projects and cooperative planning and fellowship. As noted elsewhere, the two organizations financially support each others' ministries. As noted above, Tony Hedrick was a founding member of both organizations, and served on both boards as Executive Director of both organizations. Currently John Haley serves as the Executive Director of both organizations. Each organization's relationship with the other is outlined in their affiliate ministries contract, and that contract also governs transactions between the organizations. Generally, those transactions occur monthly, and involve the transfer of funds between the two organizations for ministry project support. The organizations use a bookrecognition system, where donations between the two are offset, with the organization donating the greater amount actually sending the difference to the other organization, but with both organizations recording the total transfers on their books. All transactions, per the contract, must be for ministry purposes, and must be reported to each organization's respective boards.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Name of the organization

Adventive Cross Cultural Initiatives

Adventive Cross Cultural Initiatives

Inspection

Employer identification number

72-1588721

Part VI, Section A, Line 2: Justin Arnot (director and Secretary) and John Haley (director (chair), President, and Executive Director) are both
Members of the law firm Arnot + Haley, PLLC. The law firm has no dealings with Adventive Cross Cultural Initiatives ("ACCI"), and neither
Mr. Arnot nor Mr. Haley receive any money from ACCI.
Part VI, Section B, Line 11b: Each member of the board of directors receives a draft copy of the Form 990 and its applicable Schedules. Each
member of the board must then either make comments or suggested changes, or approve the draft. Once the draft is in a form that is approved by all directors, then it is signed and sent to the IRS.
Part VI, Section B, Line 15b: None of the questions in 15a-b apply to ACCI because it has no employees, and none of its executives or officers
or directors receive any compensation. ACCI does review all payments made to its missionary contractors to make sure that such
payments are reasonable and in line with what other missionaries working in similar geographic regions receive.
Part VI, Section C, Line 19: Although no one has ever asked to see ACCI's governing documents, conflict of interest policy, or financial
statements, ACCI has all of these documents in forms ready to be sent to anyone requesting them, either in electronic format or in paper
format.