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Department of the Treasury

CHANGE OF ACCOUNTING PERIOD

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)

OMB No 1545-0047

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

Open to Public

Intern	al Revenue	Service	▶ The organization r	nay have to			atisfy state	reporting re	equirement	s Inspe	ction
A F	or the 2	012 calend	ar year, or tax year begi	nning $J I$	N 1, 2	013 and	dending (JUN 30	, 2013	3	
B c	heck if pplicable	C Name of	forganization		-			D Emplo	yer identi	fication number	
X	Address	DESI	RING GOD MIN	STRIES	3						
	Name change	Doing Bu	usiness As						01-0	797083	
<u> </u>]Initial _return		and street (or P.O. box if in			address)	Room/suite	E Teleph	one numb		
<u> </u>	Termin- ated	2112	BROADWAY STR	REET NE	<u> </u>		150		612-	435-2401	
<u>_</u>	Amended		vn, or post office, state, a					G Gross re	ceipts \$	2,169	,818.
L	Applica- tion pending		EAPOLIS, MN	55413				H(a) Is th	is a group		
		SAME .	nd address of principal of AS C ABOVE	ficer:JON	BLOOM			ı	iffiliates? ill affiliates ir	Yes cluded?	X No □ No
			X 501(c)(3) 501(c		(insert no.)	4947(a)(1)	or 527	7] If "N	o," attach	a list. (see instruc	ctions)
			DESIRINGGOD.C					H(c) Grou	ıp exemptı	on number 🕨	
ΚF	orm of org	ganization:	X Corporation True	st Ass	ociation	Other ►	L Year	of formation	2004	M State of legal do	micile: MN
Pa		ummary									
ø	1 Bn	efly descnb	e the organization's missi	ion or most s	ignificant ac	tivities SPRE	AD A I	PASSIO	N FOR	SUPREMAC	Y
Activities & Governance	OI	F GOD	IN ALL THINGS	FOR T	HE JOY	OF ALL	PEOPLI	S THR	OUGH J	TESUS CHR	IST_
r.	2 Ch	eck this box	x 🕨 📖 if the organiza	ation discont	inued its ope	erations or dispo	osed of mor	e than 25%	of its net a	ssets	
ŏ	3 Nu	mber of vot	ing members of the gove	mıng body (l	Part VI, line 1	a)			3		7
9	4 Nu	mber of ind	ependent voting member	s of the gove	erning body (Part VI, line 1b)			4	1.	4
es	5 Tot	tal number o	of individuals employed in	ı calendar ye	ar 2012 (Par	t V, line 2a)			. 5		0
ΞĚ	6 Tot	tal number o	of volunteers (estimate if i	necessary)					6		207
Ċŧ	7 a Tot	tal unrelated	d business revenue from I	Part VIII, colu	ımn (C), line	12			7a	6	,500.
٩			business taxable income				-		. 7b	-3	,061.
				•				Prior Y	'ear	Current \	/ear
o o	8 Co	ntributions	and grants (Part VIII, line	1h)				3,25	1,244.		,880.
Revenue			ce revenue (Part VIII, line :		•				8,278.		,619.
eve		•	come (Part VIII, column (A		and 7d)		<u> </u>		7,185.		839.
άč			(Part VIII, column (A), line	•		11e)			4,870.	170	,251.
			- add lines 8 through 11 (r			•			1,577.	1,812	
			nılar amounts paid (Part I)			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			8,077.		,221.
			to or for members (Part IX		•		<u> </u>		0.		0.
ا م		•	compensation, employee			 n (A) lines 5-10)		2.16	1,794.	1,169	.428.
Expenses		•	undraising fees (Part IX, co	•	-	. (-),			0.	,,	0.
per			ng expenses (Part IX, colu			182,1	34. 漠		erecie.	1-2-2-6-1273-20	
ŭ			es (Part I <u>X, column</u> (A), line		· —			2.07	2,679.	1,144	914
		•				ine 25)			2,550.		,563.
1	10 Ro	DECE	s Add times 13-17 (must e expenses Subtract line 1	8 from line 1	2		 		9,027.		,974.
<u> </u>	10	defide less	10	O HOIT III IC 1	<u> </u>	<u> </u>	R ₆	eginning of C		End of Y	
anc	20 Jb	tal accete (F	-10				<u>-</u>		1,436.	1,451	
Net Assets or Fund Balances	2181	la Massers Z	Part X 210 \$ 3 6) (6) (Part X, line 26)		•		-		2,794.		,675.
ret	1 1		fund balances: Subtract li		no 20				8,642.	1,049	
		Signature		ile Z I ilolii ii	116 20	-		±,00	0,012.	1 1,015	,000.
	717		declare that I have examined	this return in	าตในสากต ลดดด	nanving schedule	es and statem	nents and to	the hest of m	v knowledge and h	alief it is
			Declaration of preparer (other							ry Knowicage and L	renen, it is
uue,	COITECL, a	Nu complexe	nt-f-ul	or allow or the con-	13 04364 011 41	i intermation of w	Their preparer	Thas any kno	1/-17	-12	
٥.		Signature	of officer	moun	<u> </u>			D	ate	15	
Sigr		-		IOT.M C	HIEF F	INANCIAL					
Here	e		HEW C. SODERH	IOLIII, C	UIEL L	TIMMICTAL	OFFIC	,EK			
	<u> </u>					<u></u>	г	Date	I Ob anti-	PTIN	
D		int/Type prep		'	repaller's sign	17		ilizliz	Check [D01 E07	002
Paid	<u> </u>	IAD LA		IONIA T T T	/////////////////////////////////////	(table			self-emplo		
Prep		rm's name	CLIFTONLARS	TAMIL	אממעטטער אזי	CITTME 2	00	Fi	rm's EIN 🛌	41-0746	149
Use	UNIY FI	rm's address	220 SOUTH S	TATH S	TKEET,	SUITE 3	UU			11 276 4	E00
			MINNEAPOLIS			 -		P1	hone no. 6	12 - 376 - 4	T
			return with the preparer							X Yes	No.
23200	12-10-12	2 LHA F	or Paperwork Reduction	n Act Notice	, see the se	parate instructi	ions.			Form 9 5	90 (2012)

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

Form	n 990 (2012) DESIRING GOD MINISTRIES	01-0797083	Page 2
	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:		
•	DESIRING GOD EXISTS TO SPREAD A PASSION FOR THE SUPREMA	CY OF GOD IN	İ
	ALL THINGS FOR THE JOY OF ALL PEOPLES THROUGH JESUS CHR		
	EDUCATIONAL PRINT, ELECTRONIC, AUDIO, VIDEO AND EVEN RE		
	AVAILABLE TO PEOPLE AROUND THE WORLD. WE EMPLOY THE MOS		
2	Did the organization undertake any significant program services during the year which were not listed on		
2	the prior Form 990 or 990-EZ?	[]van	XNo
	•	L res	[_Z] IVO
_	If "Yes," describe these new services on Schedule O.		X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	L Yes	LAL 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	• •	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth	ers, the total expenses,	and
	revenue, if any, for each program service reported.		005
4a	(Code) (Expenses \$ 606,570 • including grants of \$ 0 •) (Reven	.ue\$18,	<u>985.</u>)
	WEBSITE:		
	DESIRING GOD MAINTAINS A WEB SITE THAT MAKES AVAILABLE		
	YEARS OF SERMONS AND ARTICLES WRITTEN BY JOHN PIPER AND	OTHERS.	
			·
		•	
			
45	(Code) (Expenses \$ 537,605 • Including grants of \$ 0 •) (Reven	•	0.)
4b	(Code	ue \$	
	DESIRING GOD DEVELOPS BOOKS, VIDEOS, BIBLE STUDY GUIDES	TOTAL MO	
		, E1C. 10	
	ENCOURAGE OUR PROGRAM SERVICE.		
			-
4c	(Code) (Expenses \$ 506,430 • Including grants of \$ 0 •) (Reven	ue \$ 448,	634.)
	EVENTS:		
	DESIRING GOD HOSTS AN ANNUAL PASTOR'S CONFERENCE AND TWO	O TO THREE T	HEME
	CONFERENCES PER YEAR WITH ATTENDANCE RANGING FROM 1,000		
	AT EACH EVENT.	10 3,000 11	<u> </u>
	AI EACH EVENT.		-
			
4d	Other program services (Describe in Schedule O.)		
-74	(Expenses \$ 123,648 • including grants of \$ 57,221 •) (Revenue \$	1	
4e	Total program service expenses ► 1,774,253.		
_46	Total program service expenses - 7 - 7 - 7 - 9 - 9	Eorm Q	90 (2012)
23200		FORM 3	 (2012)
12-10-	-12		

DESIRING GOD MINISTRIES Form 990 (2012) DESIRING GOD
Part, IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Ì	
	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			_v
	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		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
3	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	<u> </u>		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	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	i en	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		1	12.0
_	as applicable.			Kara i
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	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	IIa		
J	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	- 1.2		
	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
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		ł	v
	Schedule D, Parts XI and XII	12a	∤	<u>X</u>
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	x	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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		1	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	[X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			3.7
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		- 1	v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	_17		<u> </u>
18	1c and 8a? If "Yes," complete Schedule G, Part II	40	j	Х
10	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		
19	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		$\frac{1}{X}$
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	 	
			990 (2	2012)

7083 _{Page}	7	0	8	3	Page
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		Yes	_No
vernment or organization in the		х	
//	21	<u> </u>	ļ
uals in the United States on Part IX,	22	х	
ation of the organization's current			
ployees? If "Yes," complete	ļ] .	
	23		Х
int of more than \$100,000 as of the			
4b through 24d and complete			
!	24a		X
riod exception?	24b		
time during the year to defease			
-	24c		
during the year?	24d		
ess benefit transaction with a			
-	25a		X
alified person in a pnor year, and	i '		
0 or 990-EZ? If "Yes," complete			
	25b		_X
compensated employee, or disqualified			
hedule L, Part II	26		X
key employee, substantial			
ntrolled entity or family member			3.5
	27	47.5	X
s (see Schedule L, Part IV			
d / D		\$.25.E	
dule L, Part IV	28a		$\frac{X}{X}$
es," complete Schedule L, Part IV	28b		
mily member thereof) was an officer,	00		Х
malata Sahadula M	28c		$\frac{\Lambda}{X}$
mplete Schedule M	29		
sets, or qualified conservation	30		X
<u>.</u>	31		Х
sets?If "Yes," complete			•
	32		X
tion under Regulations			
	33	X	
thedule R, Part II, III, or IV, and			
	34	X	
	35a		Х
nsaction with a controlled entity		1	
	35b		
t non-charitable related organization?			
	36		<u>X</u>
t a related organization			v
e Schedule R, Part VI	37		<u>X</u>
Part VI, lines 11b and 19?		~	
	VI, lines 11b and 19?	VI, lines 11b and 19?	VI, lines 11b and 19?

Form 990 (2012) Page 5 Part V 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 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 10 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 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 e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3ь 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)? **b** If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 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 organization solicit Х any contributions that were not tax deductible as charitable contributions? 6a If "Yes." did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6h Organizations that may receive deductible contributions under section 170(c). 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? Х 7a X If "Yes," did the organization notify the donor of the value of the goods or services provided? 7ь c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes." indicate the number of Forms 8282 filed during the year 7d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e $\overline{\mathbf{X}}$ Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a 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 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter. Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against 11b 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 12b b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a 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 13b organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a

232005 12-10-12

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

Form 990 (2012)

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	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		/ <u> </u>		ر يون الأون
	If there are material differences in voting rights among members of the governing body, or if the governing				322	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	<u> </u>				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	4		Y 53	,~-; ,~-;
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with	any other		1 ' 1 < ' .	بن نیک معتد
	officer, director, trustee, or key employee?		<u>-</u>	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	t supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?	-	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 ap	point	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, s	tockho	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	r by the	e following:	مالسيۇر ت دريان دريان دريان دريان		an a ger a relitation
а	The governing body?			8a	Х	
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-	ched a	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 Re	evenue	Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
ь	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	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 body	y befo	re filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					跨灣
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		-	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to conf	flicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes	es, " <i>de</i>	escribe			ı
	in Schedule O how this was done .			12c	Х	
13	Did the organization have a written whistleblower policy?			13		X
14	Did the organization have a written document retention and destruction policy?			14		X
15	Did the process for determining compensation of the following persons include a review and approva	ıl by ın	dependent		The Control	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				12	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	nth a			
	taxable entity during the year?			16a	works	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate			350		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nızatıor	n's			233
	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 ►MN			-		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Secti	on 501(c)(3)s only)	avaılab	le	
	for public inspection. Indicate how you made these available. Check all that apply.					
	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, co	nflict o	of interest policy, ar	id finar	icial	
	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 are	nd reco	ords of the organiza	tion. 🕨		
	MATTHEW C. SODERHOLM - 763-486-5872		410			
23200	2112 BROADWAY STREET NE, NO. 150, MINNEAPOLIS, MN	55	413		000	

12-10-12

Form **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
- 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 (A)	(B)	i	(C)					(D)	(E)	(F)	
Name and Title	Average	/40) than		Reportable	Reportable	Estimated	
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of	
	week		cer ar	io a o	recio	or/trus	Tee)	from	from related	other	
	(list any hours for	recto			l		i	the organization	organizations (W-2/1099-MISC)	compensation from the	
	related	20.00	ag Sig	ĺ		sated		(W-2/1099-MISC)	(W-2/1099-WII3C)	organization	
	organizations	truste	al tru		yee	iad iii	l	(** = *********************************		and related	
	below	Individual trustee or director	Institutional trustee	بة	Key employee	Highest compensated employee	Former			organizations	
	line)	를	is i	Officer	Š	돌	퉏				
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PRESIDENT, CEO, CHAIR, SECRETARY	0.00	Х		X		ļ	<u> </u>	0.	0.	0.	
(2) JOHN PIPER	1.00	\		\.,							
VICE CHAIR	45.00 1.00	Х	<u> </u>	Х		ļ		0.	0.	0.	
(3) JOSEPH SCHEUMANN	0.00	. v		X.				0.	0.	^	
ASSISTANT SECRETARY (4) SAM CRABTREE	1.00	^	<u> </u>	Λ	-		 -	0.	0.	0.	
DIRECTOR	45.00	x	l .		1		l	0.	0.	0.	
(5) PETER HEDSTROM	1.00	71		-	┢	-		0.	0.	•	
DIRECTOR	0.00	x						0.	0.	0.	
(6) PAUL RASPLICKA	1.00		 	-	_						
DIRECTOR	0.00	Х					İ	0.	0.	0.	
(7) SAM STORMS	1.00										
DIRECTOR	0.00	Х						0.	0.	0.	
(8) MATTHEW C. SODERHOLM	45.00										
CHIEF FINANCIAL OFFICER	0.00			Х				0.	0.	0.	
(9) SCOTT ANDERSON	45.00							_			
EXECUTIVE DIRECTOR	0.00			Х				0.	0.	0.	
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Form 990 (2012)

Form 990 (2012) DESTRING									01-0	1131	003	Pa	ige (
Part VII Section A. Officers, Directors, Trus		ploy	ees/			ghe	est (1		
(A)	(B)			Pos	C) ition	,		(D)	(E)			(F)	
Name and title	Average		not c	heck	more	than			Reportabl		1	tımate	
	hours per		, unle cer an					1 '.	compensat		1	nount (of
	week (list any		Г	1	F	I	T	4 ""	from relate		1	other	
	hours for	director						the	organizatio (W-2/1099-M			pensa	
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	organizations	uste	E S		8	npeu	1	(44-271099-141130)				anızatı d relate	
	below	Ea l	tlona		ploy	S S	_	-			1	ınızatıc	
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	İ					
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1b Sub-total								0.		0.	<u> </u>		0.
c Total from continuation sheets to Part VI	i, Section A	•						0.		0.			0.
d Total (add lines 1b and 1c)	<u>.</u>					<u> </u>		1	<u> </u>		l		<u> </u>
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed at	oove	e) wt	no r	eceived more than \$100	0,000 of reportat	ole			,
compensation from the organization													 (
										1	100,000		No
3 Did the organization list any former officer,	director, or tru	istee	e, ke	y en	nplo	yee,	, or	highest compensated e	mployee on		### E		
line 1a? If "Yes," complete Schedule J for s	uch ındıvıdual										3		X
4 For any individual listed on line 1a, is the su	ım of reportabl	le co	mpe	ensa	ition	and	d ot	her compensation from	the organization	1			1
and related organizations greater than \$150	0,000? If "Yes,	" coi	mple	ete S	Sche	edule	e J 1	for such ındıvıdual			4		Х
5 Did any person listed on line 1a receive or a	ccrue comper	nsatı	on f	rom	any	unr	elat	ted organization or indivi	idual for service:	s	Ti		مر مردر در ا
rendered to the organization? If "Yes," com	plete Schedule	e J fo	or su	ıch į	oers	on					5		X
Section B. Independent Contractors								-					
Complete this table for your five highest co	mpensated inc	depe	ende	nt c	ontr	acto	ors t	that received more than	\$100,000 of cor	mpens	ation fr	om	
the organization. Report compensation for	-									•			
(A)								(B)			(C)	
Name and business	address	NC	NE	3				Description of s	ervices	C	omper		
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2 Total number of independent contractors (i		ot Iır	nite	d to			stec	d above) who received in	nore than	1		TH.	
\$100,000 of compensation from the organi	zation 🕨				()			·	2			
								- 			Form 9	90 (2	012)

053-5J42

Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII **(B)** (D) Revenue excluded Related or Unrelated Total revenue from tax under exempt function business sections 51 513, or 51 revenue revenue Gifts, Grants Ilar Amounts 1 a Federated campaigns 1a b Membership dues 1b 1c c Fundraising events 27,530. d Related organizations Contributions, and Other Simi e Government grants (contributions) 1e All other contributions, gifts, grants, and ,146,350 similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 173,880 h Total. Add lines 1a-1f Business Code 442,134 448,634 2 a CONFERENCE REVENUE 900099 6,500 Program Service Revenue 900099 WEBSITE REVENUE 18,985. 18,985 d f All other program service revenue 467,619. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 3 839 839. other similar amounts) Income from investment of tax-exempt bond proceeds 4 5 Royalties (i) Real (ii) Personal 6 a Gross rents b Less. rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 527,480 and allowances 357,229. b Less: cost of goods sold 170,251 170,251 c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 11 a d All other revenue Total. Add lines 11a-11d 812,589. 6,500. 171,090. Total revenue. See instructions. Form 990 (2012)

d Lobbying e 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 39,697, 30,189, 9,508, 107,790, 58,134, 37,477, 12,179, 15 Royalties Cocupancy 79,288, 41,107, 30,768, 7,413, 17 Travel 22,261, 8,303, 3,272, 10,686, 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 Conferences, conventions, and meetings 19 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 11 Insurance 23 Insurance 24 Other expenses. Ilemize expenses not covered above, (i.st miscellaneous expenses in line 24e, if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on School (B) amount, list line 24e expenses on School (B) amount, list line 24e expenses on School (B) amount, list line 24e expenses on School (B) amount, list line 24e expenses on School (B) amount skill meet expenses on School (B) amount skill		on 501(c)(3) and 501(c)(4) organizations must con		her organizations must o	omplete column (A)	
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b Legal 8,895. 8,895. 19,349 1,230. 17,915. 204. d Lobbying e 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.) 42 Advertising and promotion 39,697 30,189 9,508. 107,790 58,134 37,477 12,179. 12 Information technology 107,790 58,134 37,477 12,179. 13 Royaltes 17 Travel 10 Cocupancy 79,288 41,107 30,768 7,413. 17 Travel 22,261 8,303 3,272 10,686. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 3,032 1,516. 19 Payments to affiliates 12,954 8,406 1,517 9,517 9,516. 19 Payments to affiliate 12,954 8,406 1,517 9,516. 19 Payments to affiliate 12,954 8,406 1,517 9,517 9,516. 19 Payments to affiliate 12,954 8,406 1,517 9,517	11	Fees for services (non-employees):				
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Check here fig. (f following SOP 98-2 (ASC 958-720)						
	232011					Form 990 (2012)

Form 990 (2012)
Part X Balance Sheet

		Check if Schedule O contains a response to an	y ques	tion in this Part X	T	1	
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,599,214.	1	1,097,017.
1	2	Savings and temporary cash investments		·		2	
	3	Pledges and grants receivable, net				3	100,000.
1	4	Accounts receivable, net			42,527.	4	26,980.
	5	Loans and other receivables from current and for	ormer o	officers, directors,		1	
		trustees, key employees, and highest compens	ated e	nployees Complete		1	The state of the s
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqual	fied pe	rsons (as defined under		3. H.	
		section 4958(f)(1)), persons described in section		1 1 4 5 1 1 2 3 1 1			
		employers and sponsoring organizations of sec	tion 50	1(c)(9) voluntary	The state of the second	30	
		employees' beneficiary organizations (see instr)	. Comp	lete Part II of Sch L		6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			113,502.	8	57,230. 72,616.
	9	Prepaid expenses and deferred charges			89,895.	9	72,616.
- -	10a	Land, buildings, and equipment: cost or other					
-		basis. Complete Part VI of Schedule D	10a	845,790.			
	b	Less: accumulated depreciation	10b	748,290.	116,298.	10c	97,500.
	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			
-	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equ	al line	34)	1,961,436.	16	1,451,343.
	17	Accounts payable and accrued expenses	173,927.	17	254,714.		
	18	Grants payable .	4 7 9 9 6 7	18	1.6		
	19	Deferred revenue	178,867.	19	146,961.		
:	20	Tax-exempt bond liabilities			20		
2	21	Escrow or custodial account liability. Complete			21		
:	22	Loans and other payables to current and forme	r office	rs, directors, trustees,			
		key employees, highest compensated employee	es, and	disqualified persons.	The state of the second	為經	
1		Complete Part II of Schedule L			ļ	22	
2	23	Secured mortgages and notes payable to unrela	ated th	ird parties		23	
:	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
:	25	Other liabilities (including federal income tax, pa	-				
		parties, and other liabilities not included on lines	s 17-24). Complete Part X of			
		Schedule D				25	
:	26	Total liabilities. Add lines 17 through 25		· · · · · · · · · · · · · · · · · · ·	352,794.	26	401,675.
		Organizations that follow SFAS 117 (ASC 958	3), che	k here 🕨 🔼 and			
:		complete lines 27 through 29, and lines 33 ar	ıd 34.			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
: :	27	Unrestricted net assets			1,331,278.	27	821,826.
:	28	Temporanly restricted net assets		-	277,364.	28	227,842.
: :	29	Permanently restricted net assets		·· · · ———		29	
		Organizations that do not follow SFAS 117 (A	SC 95	8), check here 🕨 📖			
		and complete lines 30 through 34.			The state of the s		
:	30	Capital stock or trust principal, or current funds		•		30	
;	31	Paid-in or capital surplus, or land, building, or ed				31	
	32	Retained earnings, endowment, accumulated in	come,	or other funds .	4 600 645	32	1 0 10 55
		Total net assets or fund balances			1,608,642.	33	1,049,668.
.	33	TOTAL LIET 922612 OF ITALIA PARALLOCO			1,961,436.	34	1,451,343.

Form	990 (2012) DESIRING GOD MINISTRIES	01-07	97083	Page 12
Pa	rt XI Reconciliation of Net Assets			
	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)	1	1,812	<u>,589.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,371	
3	Revenue less expenses. Subtract line 2 from line 1	3		,974.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,608	<u>,642.</u>
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments .	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	1,049	,668.
Pa	rt·XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			
			Y	es No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a		
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis		200	
ь	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,		
	consolidated basis, or both:			
	Separate basis X Consolidated basis Both consolidated and separate basis			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c 2	X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Audit		
	Act and OMB Circular A-133?	-	3a	<u> X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
			Form 9 9	90 (2012)

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047 inspection:

Name of the organization

DESIRING GOD MINISTRIES

Employer identification number 01-0797083

			O COD MINIO							1 0777003	<u> </u>
Part I.:	Reason	for Public Char	ity Status (All organiz	zations mu	st comple	te this par	t.) See ins	tructions.			
The organ	nization is not a	a private foundation	because it is: (For lines	1 through	11, check	only one b	ox.)				
1 🗀	A church, co	nvention of churche	s, or association of chur	rches desc	nbed in se	ection 170	(b)(1)(A)(i).			
2	A school des	cribed in section 17	70(b)(1)(A)(ii). (Attach Sc	chedule E)							
з 🗀	A hospital or	a cooperative hospi	ital service organization	described	in section	170(b)(1)	(A)(iii).				
4 🔲	A medical re	search organization	operated in conjunction	with a hos	pital desc	nbed in se	ction 170	(b)(1)(A)(ii	i). Enter	the hospital's nar	ne,
	city, and stat	e:									
5	An organizat	on operated for the	benefit of a college or u	niversity o	wned or op	perated by	a govern	mental un	t describ	oed in	
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)								
6	A federal, sta	ite, or local governm	ent or governmental uni	rt describe	d in sectio	n 170(b)(1	1)(A)(v).				
7 🗀		-	ceives a substantial part					or from the	general	public described	ın
	-	b)(1)(A)(vi). (Comple									
8 🗀			section 170(b)(1)(A)(vi).	(Complete	Part II.)						
9 X			eives: (1) more than 33			rom contri	butions, n	nembershi	p fees, a	and gross receipts	from
	_	-	nctions - subject to certa								
		•	axable income (less sec								
		509(a)(2). (Complete					·	_			
10			perated exclusively to te	st for publ	ıc safety. S	See sectio	n 509(a)(4	1).			
11 🔲			perated exclusively for the						y out the	purposes of one	or
			ations described in secti								
			organization and compl								
	a Type			ype III - Fu			c	ј 🗀 Тур	e III - No	n-functionally inte	grated
е 🗀			at the organization is not	controlled	directly o	r indirectly	by one o	r more dis	qualified	persons other tha	an
		·	han one or more publicl								
f		•	tten determination from		_						
•		rganization, check th			_						
g		-	organization accepted ai	ny gift or c	ontribution	from any	of the foll	owing per	sons?		
3	_		lirectly controls, either a							, Yes	No
			upported organization?	J		•		,,,,,,	•	11g(i)	1
	•		n described in (i) above?	•	••	•				11g(ii)	
		-	person described in (i)		e?		• •			11g(iii)	
h			about the supported or								
••	1 101100 1110 1	onorming milanian		J	(-) -						
/i) Name	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Did you	notify the	(vi) ls	the	(vii) Amount of mo	netary
	anization	(11) = 114	(described on lines 1-9	in col. (i) lis		organizat	ion in col.	organizátio (i) organiz	on in col. ed in the	support	nctary
0.9			above or IRC section	governing	document?	(i) of you	support?	U.S			
			(see instructions))	Yes	No	Yes	No	Yes	No	\	
					·						
								1		!	
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				The second	5.41E-				THE REPORT OF THE PERSON NAMED IN COLUMN TWO IN COLUMN TO THE PERSON NAMED IN COLUMN TO THE PERS		
Total											

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

Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-12

Schedule A (Form 990 or 990-EZ) 2012 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not					l í	
	include any "unusual grants.")						
2	Tax revenues levied for the organ-					1	
	ızatıon's benefit and either paid to			İ		}	
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	district and district (1) in a	respect a summy interpretation in the	CONTROL STORY LL TONGS		Control by the second of the s	
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	Printer States					
	amount shown on line 11,						
_	column (f)	7 (100 - 1988)	THE THE PARTY OF THE PROPERTY	The street of the second	ATTENTON DE LA CONTROL DE LA CONTROL DE LA CONTROL DE LA CONTROL DE LA CONTROL DE LA CONTROL DE LA CONTROL DE L LA CONTROL DE LA CONTROL DE LA CONTROL DE LA CONTROL DE LA CONTROL DE LA CONTROL DE LA CONTROL DE LA CONTROL D		·
	Public support. Subtract line 5 from line 4 ction B. Total Support	Carter Harrist St.	Annaham Casasa Santa	Committee and the contraction of the second	Compare the second of the second	Sold Contract of the Contract of the Sold of the Contract of the Sold of the Contract of the Sold of the Contract of the Sold of the Contract of the Sold of the Contract of the Sold of the Contract of the C	
	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	(B) 2003	(0) 2010	(4) 2011	(0) 2012	(i) Total
8	Gross income from interest,						
Ü	dividends, payments received on						
	secunties loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
_	activities, whether or not the	<u> </u>					
	business is regularly carried on					ļ	
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	的問題的	が大変観点が				
12	Gross receipts from related activities,	, etc. (see instructi	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stop	here .	<u></u>				<u> </u>
	ction C. Computation of Publ				·	r	- ·
	Public support percentage for 2012 (column (f))		14	%
	Public support percentage from 2011					15	<u>%</u>
16a	33 1/3% support test - 2012. If the				14 is 33 1/3% or m	nore, check this box	cand
	stop here. The organization qualifies				L 45 - 00 4 /00/	·	
b	33 1/3% support test - 2011. If the				line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual				. 40 40 40		
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac					it iv now the organi	zation
	meets the "facts-and-circumstances"					17a and line 15 is 1	► ∟
b	10% -facts-and-circumstances tes						U70 UI
	more, and if the organization meets to						
10	organization meets the "facts-and-cire Private foundation. If the organization						
18	Private foundation. If the organization	on alla not check a	DUX UIT III IS, 10	a, 100, 17a, 01 17C		edule A (Form 990	
					30116	י טפני ווווט ון א טומט	J. JJU-LZJ ZU IZ

Schedule A (Form 990 or 990-EZ) 2012 DESIRING GOD MINISTRIES 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	olov, ploage comp	Sioto i ditiii,				
	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and	(4),200					
	membership fees received. (Do not						
	include any "unusual grants ")	2,993,614.	2,642,533.	2,806,132.	3,059,479.	4,413,493.	15,915,251.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose	3,996,542.	3,950,354.	3,848,026.	3,628,374.	3,751,264.	19,174,560.
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ- ization'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	6,990,156.	6,592,887.	6,654,158.	6,687,853.	8,164,757.	35,089,811.
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons	250,000.	270,000.	205,000.	200,000.	803,410.	1,728,410.
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						0.
	amount on line 13 for the year	250,000.	270,000.	205,000.	200,000.	803,410.	1,728,410.
	Add lines 7a and 7b	March Market No.	Tatal Sunsy Care		· ·	中国国际	33,361,401.
	Public support (Subtract line 7c from line 6) ction B. Total Support	Application scarces	State of the said of the said of the said	AND THE SECTION OF THE PROPERTY OF	The end and the second comments	The second second second second	,,
	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6	6,990,156.	6,592,887.	6,654,158.	6,687,853.	8,164,757.	35,089,811.
	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,011.	-191.	620.	1,315.	2,934.	10,689.
t	Unrelated business taxable income (less section 511 taxes) from businesses		,				
	acquired after June 30, 1975	6,011.	-191.	620.	1,315.	2,934.	10,689.
	c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0,011.	151.	020.	1,313.	2,331.	10,003.
12	Other income. Do not include gain or loss from the sale of capital			1,315.	1,565.	20,763.	23,643.
13	assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12)	6,996,167.	6,592,696.	6,656,093.	6,690,733.	8,188,454.	35,124,143.
	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3) organiza	
	check this box and stop here						
	ction C. Computation of Publ						04.00
15	Public support percentage for 2012 (l			olumn (f))		15	94.98 %
16				<u> </u>		16	96.52 %
	ction D. Computation of Inves						02
17	Investment income percentage for 20			e 13, column (f))		17	.10 %
18						18	
19	a 33 1/3% support tests - 2012. If the						/ is not ►X
	more than 33 1/3%, check this box a						• •
t	33 1/3% support tests - 2011. If the line 18 is not more than 33 1/3%, che						▶ □
20							· []
2320	23 12-04-12	Jia not ongoit u		.,		edule A (Form 990	or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012 DESTRING GOD MINISTRIES 01-0797083 Page 4
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).
SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME:
MISCELLANEOUS INCOME
2010 AMOUNT: \$ 1,315.
2011 AMOUNT: \$ 1,565.
2012 AMOUNT: \$ 20,763.
THE ORGANIZATION IS FILING A SHORT YEAR RETURN AS A RESULT OF A CHANGE IN
THEIR FISCAL YEAR-END. SCHEDULE A, PART III, COLUMN E IS COMBINED FOR THE
18 MONTH PERIOD TO REFLECT THE CHANGE IN YEAR END FROM 12/31/12 TO
6/30/13.

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. OMB No 1545-0047

2012
Open to Publication

Name of the organization

DESIRING GOD MINISTRIES

Employer identification number 0.1 - 0.797083

Pai	t l: Organizations Maintaining Donor Advise		or Accounts. Complete if the
ـــنا	organization answered "Yes" to Form 990, Part IV, lin		•
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	ed funds
3	are the organization's property, subject to the organization's	•	Yes No
e	Did the organization inform all grantees, donors, and donor a	•	
6	for charitable purposes and not for the benefit of the donor of		· ·
	impermissible private benefit?	of donor advisor, or for any other purpose of	Yes No
Par	till: Conservation Easements. Complete if the org	ranization answered "Ves" to Form 990. Pa	
			atty, me 7.
1	Purpose(s) of conservation easements held by the organization of lend for public use (a.g. recognition of		awally was artest land area
	Preservation of land for public use (e.g., recreation or e	· —	oncally important land area
	Protection of natural habitat	Preservation of a certif	led historic structure
•	Preservation of open space	f	6
2	Complete lines 2a through 2d if the organization held a quali	ried conservation contribution in the form of	or a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
	T.I		
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	and an about a discount of the Anna Anna Anna Anna Anna Anna Anna Ann	2b
С.	Number of conservation easements on a certified historic str		<u>2c</u>
d	Number of conservation easements included in (c) acquired	after 8/1//06, and not on a historic structul	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organization during the tax
	year >	4	
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the per		Yes No
_	violations, and enforcement of the conservation easements i	·	
6	Staff and volunteer hours devoted to monitoring, inspecting,	_	_ _
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(r	□ Yes □ No
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservati	-	
	include, if applicable, the text of the footnote to the organization	tion's illiancial statements that describes the	le organization's accounting for
Pai	conservation easements. t III: Organizations Maintaining Collections o	f Art Historical Treasures or Ot	her Similar Assets
- 4	Complete if the organization answered "Yes" to Form		ner ommar Assets.
			ant and balance short wade of art
ıa	If the organization elected, as permitted under SFAS 116 (AS	**	
	historical treasures, or other similar assets held for public ext		ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri		
Ь	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	bucation, or research in turtherance of pub	lic service, provide the following amounts
	relating to these items:		.
		• • •	\$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	.
а	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		> \$

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

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012

232053 12-10-12

liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2012 DESIRING GOD MINISTRIES		01-0797083 Page 4
Par	t XI. Reconciliation of Revenue per Audited Financial Statemen	its With Revenue per F	Return
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		173.12 21.02.22
а	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	19 Mary 1997
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	137.5
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1	• •	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		18 SEPT
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
h	Other (Describe in Part XIII.)	4b	
	Add lines 4a and 4b		4c
C E	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	•	5
E _a	t-XII Reconciliation of Expenses per Audited Financial Statemen	nts With Expenses per	
4	<u> </u>	The Trial Experience per	1
1	Total expenses and losses per audited financial statements	•	Small
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	l a- l	
a	Donated services and use of facilities	2a	<u></u>
b	Prior year adjustments	2b	Similar Sinday S
С	Other losses	2c	A STATE OF THE STA
d	Other (Describe in Part XIII)	2d	and the second
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		And the second
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	The state of the s
С	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5
	t·XIII Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,		
	e 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to p		ion.
PAI	RT X, LINE 2: THE ORGANIZATION QUALIFIES AS	A TAX-EXEMPT	
ORG	GANIZATION DESCRIBED IN SECTION 501(C)(3) A	ND IS NOT A PRI	VATE
FOU	UNDATION UNDER SECTION 509(A)(2) OF THE INT	ERNAL REVENUE C	ODE. AS SUCH,
IT	IS SUBJECT TO FEDERAL AND STATE INCOME TAX	ES ON NET UNREL	ATED BUSINESS
INC	COME.		
THE	ORGANIZATION ADOPTED THE INCOME TAX STANDA	ARD FOR UNCERTA	IN TAX
POS	SITIONS. NO LIABILITY WAS RECOGNIZED BY THE	ORGANIZATION A	S A RESULT OF
			Schedule D (Form 990) 2012

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

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

Open to Public.

2 []

Employer identification number 01-0797083 X Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection DESIRING GOD MINISTRIES General Information on Grants and Assistance Name of the organization

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	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	racinion that received more than \$5,000. Bort II can be duplicated if additional space is peopled
Describe in Part IV the organize	Rartilial Grants and Other Assis	m hawara that theirings
2	D.	

criteria used to award the grants or assistance?

Part In

1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (c) or government cash grant	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CROSSWAY							
1300 CRESCENT ST WHEATON, IL 60187	36-1143987	501(C)(3)	25,000.	0	N/A	N/A	FOUNDATION GRANT
FEED MY STARVING CHILDREN							
401 93RD AVE NW COON RAPIDS, MN 55433	41-1601449	501(C)(3)	2,000.	0.	A/N.0	N/A	FOUNDATION GRANT
SAMARITANS PURSE							
PO BOX 3000	000000000000000000000000000000000000000		i i	c			
BOONE, NC 28607	58-143/002	501(C)(3)	.000,6	0	N/A	N/A	FOUNDATION GRANT
JONI & FRIENDS							
750 2ND ST NE HOPKINS, MN 55343	95-3402002	501(C)(3)	5,000.	0	N/A	N/A	FOUNDATION GRANT
LIVING WATER INTERNATIONAL							
4001 GREENBRIAR DR							-
STAFFORD, TX 77477	76-0324875	501(C)(3)	5,000.	0.	0.N/A	N/A	FOUNDATION GRANT
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government o	rganizations listed in th	e line 1 table				5.

3 Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) (2012)

232101 12-18-12

Schedule I (Form 990) (2012)

Partilli, 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

Page 2

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(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
DONATED RESOURCES	400	0	10,221.COST		BOOKS
grant IV. Supplemental Information. Complete this part to provide the	ide the information	n required in Part I,	line 2, Part III, colum	information required in Part I, line 2, Part III, column (b), and any other additional information	ormation
SCHEDULE I, PART I, LINE 2: THE GR	ANTS ARE	EVALUATED	GRANTS ARE EVALUATED CAREFULLY BY OUR	BY OUR	
OUTREACH TEAM AND ONLY GRANTED TO ORGANIZATIONS	ORGANIZA'	TIONS THAT	SET HIGH	STANDARDS AND	
USE THE GRANT MONEY FOR ITS INTENDED	DED PURPOSE.	SE.			

232102 12-18-12

Schedule I (Form 990) (2012)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public 6. Inspection 🧗 🎏 🔻

Name of the organization

Employer identification number

DESIRING GOD MINISTRIES 01-0797083 FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: MEDIA AVAILABLE TO US TO ACCOMPLISH THIS MISSION. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: DONATED RESOURCES: DESIRING GOD MAKES MOST OF OUR RESOURCES AVAILABLE FOR WHATEVER PEOPLE CAN AFFORD OVER THE PHONE AND VIA THE INTERNET. EXPENSES \$ 123,648. INCLUDING GRANTS OF \$ 57,221. REVENUE \$ 0. FORM 990, PART VI, SECTION A, LINE 1: THE OFFICERS OF THE CORPORATION, AS ELECTED FROM TIME TO TIME BY THE BOARD OF DIRECTORS, SHALL CONSTITUTE AN EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS. THE IMMEDIATE PAST CHAIR MAY ALSO BE A MEMBER OF THE EXECUTIVE COMMITTEE. THERE MUST BE A MINIMUM OF THREE (3) DIRECTORS SERVING ON THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE SHALL HAVE THE POWER AND AUTHORITY TO ACT ON BEHALF OF THE BOARD OF DIRECTORS BETWEEN MEETINGS OF DIRECTORS AND SHALL HAVE THE RESPONSIBILITY OF WORKING WITH AND ASSISTING THE PRESIDENT WITH RESPECT TO THE FINANCIAL AND PROGRAM DETAILS OF THE CORPORATION. FORM 990, PART VI, SECTION A, LINE 6: BETHLEHEM BAPTIST CHURCH OF MINNEAPOLIS, MINNESOTA IS THE SOLE MEMBER OF THE CORPORATION. FORM 990, PART VI, SECTION A, LINE 7A: THE SOLE MEMBER ANNUALLY APPOINTS

BOARD OF DIRECTORS OF THE ORGANIZATION.

FORM 990, PART VI, SECTION A, LINE 7B: THE SOLE MEMBER MAY AUTHORIZE THE

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Schedule O (Form 990 or 990-EZ) (2012)

BOARD OF DIRECTORS, TO EXERCISE FROM TIME TO TIME THE POWER OF AMENDMENT OF THE BYLAWS IN THE MANNER SPECIFIED HEREIN. WHEN THE SOLE MEMBER HAS AUTHORIZED THE BOARD OF DIRECTORS TO AMEND THE BYLAWS, THE BOARD OF DIRECTORS, BY A TWO-THIRDS VOTE OF THOSE WHO ARE PRESENT AND ENTITLED TO VOTE ON THE PROPOSED AMENDMENT, MAY AMEND THE BYLAWS AT ANY MEETING OF THE BOARD. THE BOARD MAY NOT ADOPT, AMEND, OR REPEAL A BYLAW PRESCRIBING PROCEDURES FOR REMOVING DIRECTORS OR FILLING VACANCIES IN THE BOARD, OR FIXING THE NUMBER OF DIRECTORS OR THEIR CLASSIFICATIONS, QUALIFICATIONS, OR TERMS OF OFFICE, BUT MAY ADOPT OR AMEND A BYLAW TO INCREASE THE NUMBER OF DIRECTORS. THE SOLE MEMBER MAY REPEAL AN AMENDMENT ADOPTED BY THE BOARD.

NOTICE OF THE MEETING AND OF THE PROPOSED AMENDMENT(S) SHALL BE GIVEN AT LEAST FIVE (5) DAYS BEFORE THE SCHEDULED MEETING. SUBJECT TO THE FOREGOING, THE SOLE MEMBER MAY PROSPECTIVELY REVOKE THE AUTHORITY OF THE BOARD TO EXERCISE THE POWER OF THE MEMBER TO AMEND THE BYLAWS.

FORM 990, PART VI, SECTION B, LINE 11: THE CHIEF FINANCIAL OFFICER REVIEWS
THE DETAILS OF THE CONTENTS OF THE FORM 990 WITH THE PRESIDENT. A COPY OF
THE FORM 990 IS FORWARDED TO EACH MEMBER OF THE BOARD.

FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY

COVERS BOARD MEMBERS, PAID STAFF, AND VOLUNTEERS. BOARD MEMBERS WHO HAVE A

CONFLICT OF INTEREST SHOULD NOT PARTICIPATE IN DISCUSSIONS OR VOTE OR BE

INVOLVED IN THE DECISION MAKING PROCESS IN MATTERS RELATING TO THE

CONFLICT. BOARD MEMBERS ARE ASKED TO SIGN AN AGREEMENT TO ABIDE BY THE

CONFLICT OF INTEREST POLICY. ALL DELIBERATIONS OF ACTIONS IN WHICH A

DIRECTOR HAS A CONFLICT OF INTEREST ARE DOCUMENTED IN THE MEETING MINUTES.

FORM 990, PART VI, SECTION B, LINE 15A: THE PRESIDENT'S SALARY WAS REVIEWED

232212
01-04-13
Schedule O (Form 990 or 990-EZ) (2012)

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012 TOpen to Public F Employer identification number 01-0797083

[Part]] Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

DESIRING GOD MINISTRIES

(a)	(q)	(0)	(p)	(e)	(t)
Name, address, and EIN (if applicable) of disregarded entrty	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity $\stackrel{\sim}{\sim}$
CHILDREN DESIRING GOD - 01-0797083 2601 E, FRANKLIN AVE					
96	CHILDREN'S CURRICULUM	MINNESOTA	600,337.	138,445.	138,445, DESIRING GOD MINISTRIES
	-1				
	_				
FEW TWITT Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990. Part IV, line 34 because it had one or more related tax-exempt	ations (Complete if the organization ar	Iswered "Yes" to Form 990. Par	t IV line 34 because	t had one or more	elated tax-exempt

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

(a)	(q)	(0)	(d)	(e)	(t)	(6)	
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13)	(.
of related organization		foreign country)	section	status (if section	entity	entrty?	
		:		501(c)(3))		Yes	No
ВЕТНІВНЕМ ВАРТІST CHURCH - 41-0705831							
720 13TH AVE							
MINNEAPOLIS, MN 55415	Сниясн	MINNESOTA	501(C)(3)	LINE 1	N/A	×	
BETHLEHEM URBAN INITIATIVES INC - 03-0406197							
720 13TH AVE							
MINNEAPOLIS, MN 55415	URBAN MINISTRY	MINNESOTA	501(C)(3)	LINE 9	N/A	×	
BETHLEHEM COLLEGE AND SEMINARY - 27-0680532							ļ
720 13TH AVE							
MINNEAPOLIS, MN 55415	COLLEGE & SEMINARY	MINNESOTA	501(C)(3)	LINE 2	N/A	×	

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

232161 12-10-12 LHA

Schedule R (Form 990) 2012

Page 2

Schedule R (Form 990) 2012 DESIRING GOD MINISTRIES 01-0797083 (Part III) Identification of Related Organizations treated as a partnership during the tax year.)

Schedule R (Form 990) 2012	Schedule						36				232162 12-10-12
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			ļ 								
			 		-						
			-								
-	_										
										i	
Ves No	assets			or trust)			country)				
Percentage 512(b)(13) ownership	Share of Perciend-of-year own		Share of total	Type of entity (C corp, S corp,		Direct controlling entity	Legal domicile (state or foreign	Primary activity	Pring	<u>Z</u> c	Name, address, and EIN of related organization
(H)	(6)		(J)	(e)		(g)	<u>(</u>)	(q)			(a)
e or more related	because it had one	ırt IV, line 34	orm 990, Pa	ed "Yes" to F	ion answer	the organizat	omplete if	oration or Trust (C year)	as a Corping the tax	ganizations Taxable rporation or trust dur	ipairing identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, ווהפ 34 because it had one or more related has a corporation or trust during the tax year)
						j					
-											
		-									
· · ·									_		
Yes No	20 of Schedule L K-1 (Form 1065)	Yes No	assets			rom tax under s 512-514)	excluded t section		foreign country)		
General or Percentage managing ownership	Code V-UBI	Disproportion- ate allocations?	Share of end-of-year		Share of total income	Predominant income (related,	Predomi (related	Direct controlling entity	domicile (state or	Primary activity	Name, address, and EIN of related organization
(k)	(3)	(H)	(a)		i .	(e)		(p)	(၁)	(q)	(a)

01-0797083 Page 3

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

				⊢
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule 1. During the tax year did the proprietation engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more r	elated organizations listed		Yes No
a Receipt of (i) interest (ii) annuties (iii) royalties or (iv) rent from a controlled entity				Ta X
b Gift, grant, or capital contribution to related organization(s)				1b X
c Gift, grant, or capital contribution from related organization(s)				1c X
d Loans or loan guarantees to or for related organization(s)				1d X
e Loans or loan guarantees by related organization(s)			ı r	1e X
			<u> </u>	
f Dividends from related organization(s)				¥.
g Sale of assets to related organization(s)				1g X
h Purchase of assets from related organization(s)				th X
i Exchange of assets with related organization(s)				11 X
j Lease of facilities, equipment, or other assets to related organization(s)			,	1) X % % %
k Lease of facilities, equipment, or other assets from related organization(s)				Washing cook to the X
l Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)		!	×
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)		.	1m X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)uoi			\vdash
o Sharing of paid employees with related organization(s)				
p Reimbursement paid to related organization(s) for expenses			13	10 X
q Reimbursement paid by related organization(s) for expenses				19 X
r Other transfer of cash or property to related organization(s)			****	N CONTRACTOR
s Other transfer of cash or property from related organization(s)				1s X
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete t	his line, including covered	relationships and transaction thresholds.	
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	hev
(1)				
(6)				
(3)				3
(4)				
(5)				-
(6)				
232163 12-10-12	3.7		Schedule R (Schedule R (Form 990) 2012

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

tage	-				1		1									
(i) (j) (k) Code V-UBI General or Percentage amount in box 20 Imanaging Ownership									:							
(j) heral or P naging	Yes No			_								 		 		
Gen Gen	<u> </u>	 	-		\bot				 -		\dashv		<u> </u>		 	
(i) e V-UBI t in box 2	1065)										İ					
Code	(Form															
\(\frac{1}{2}\)	2	 			+		<u> </u>				_	 	 	 -	 	
(h) Disprop	Yes No							 			4	 	 ļ_	 		
(g) Share of end-of-year	assets															
(f) Share of total						-		•							•	
(c)(3)	Yes No					 		 		 				 	 	
(e) Are all partners sec 501(c)(3)	e S	 			-	 	 <u> </u>	 	 	 	\downarrow		 	 		
(d) Predominant income (related, unrelated,	inder section 512-51															ï
elign lign				 		 	 	 	 	 	+		 -	 		
(c) Legal domicile (state or foreign	country)												ļ.			
	_	 	<u> </u>	 		 		 		 	\dagger		-	 		
(b) Primary activity																
(a) Name, address, and EIN Primary activity (state or foreign (state or foreign (c) (d) (e) (d) (e) (e) (e) (felated, unrelated, unrelated, from the foreign (c) (d)																

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Schedule R (Form 990) 2012

Schedule R	(Form 990) 2012	DESIRING	GOD MINISTRIES	01-0797083	Page 5
Part VII	(Form 990) 2012 Supplemental Info	rmation			
1,12	Complete this part to pro	ovide additional info	rmation for responses to quest	tions on Schedule R (see instructions)	
	Complete this part to pre	37100 000111011111	matien to deponded to quee		
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