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Form **990****Return of Organization Exempt From Income Tax**

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

- ▶ Do not enter Social Security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

2013**Open to Public
Inspection**

A For the 2013 calendar year, or tax year beginning , and ending

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization GRACE EPISCOPAL YOUTH MINISTRY TR
 Doing Business As
 Number and street (or P O box if mail is not delivered to street address) Room/suite
 1 W 4th St 4th Floor MAC D4000-041
 City or town State ZIP code
 Winston Salem NC 27101-3818
 Foreign country name Foreign province/state/country Foreign postal code

D Employer identification number 43-6812820
E Telephone number 888-730-4933
G Gross receipts \$ 385,278

F Name and address of principal officer
 WELLS FARGO BANK NA 1 W 4TH ST 4TH FLOOR, WINSTON SALEM, NC 27101-3818

H(a) Is this a group return for subordinates? ☐ Yes ☒ No
H(b) Are all subordinates included? ☐ Yes ☒ No
 If "No," attach a list (see instructions)

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ N/A **H(c) Group exemption number** ▶

K Form of organization ☐ Corporation ☒ Trust ☐ Association ☐ Other ▶ **L Year of formation** 1998 **M State of legal domicile** MI

Part I Summary

1 Briefly describe the organization's mission or most significant activities: SUPPORT OF THE DIRECTOR'S SALARY AND SUPPLIES NECESSARY FOR THE RUNNING OF THE YOUTH MINISTRY AT GRACE EPISCOPAL CHURCH

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) **3** 1

4 Number of independent voting members of the governing body (Part VI, line 1b) **4** 1

5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) **5** 0

6 Total number of volunteers (estimate if necessary) **6** 0

7a Total unrelated business revenue from Part VIII, column (C), line 12 **7a** 0

b Net unrelated business taxable income from Form 990-T, line 34 **7b** 0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	1,370	0
9 Program service revenue (Part VIII, line 2g)		0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	165,737	49,347
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	167,107	49,347
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	34,410	37,144
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25)		0
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	10,301	13,085
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	44,711	50,229
19 Revenue less expenses. Subtract line 18 from line 12	122,396	-882
20 Total assets (Part X, line 16)	Beginning of Current Year 712,882	End of Year 712,396
21 Total liabilities (Part X, line 26)		0
22 Net assets or fund balances. Subtract line 21 from line 20	712,882	712,396

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here **Signature of officer** John Sulentis **Date** 5/5/2014
JOHN SULENTIC SVP Wells Fargo Bank N.A.
 Type or print name and title

Paid Preparer Use Only **Print/Type preparer's name** JOSEPH J. CASTRIANO **Preparer's signature** Joseph J. Castriano **Date** 5/5/2014 **Check** ☒ if self-employed **PTIN** P01251603
Firm's name ▶ PricewaterhouseCoopers, LLP **Firm's EIN** ▶ 13-4008324
Firm's address ▶ 600 GRANT ST, PITTSBURGH, PA 15219-2777 **Phone no** 412-355-6000

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2013)

HTA

ENVELOPE
POSTMARK DATE MAY 08 2014

SCANNED JUN 04 2014

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Part III**Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☐

- 1** Briefly describe the organization's mission.
 SUPPORT OF THE DIRECTOR'S SALARY AND SUPPLIES NECESSARY FOR THE RUNNING OF THE YOUTH MINISTRY AT GRACE EPISCOPAL CHURCH
-
- 2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
 If "Yes," describe these new services on Schedule O
- 3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
 If "Yes," describe these changes on Schedule O.
- 4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
-
- 4a** (Code:) (Expenses \$ 40,712 including grants of \$ 37,144) (Revenue \$)
 SUPPORT OF THE DIRECTOR'S SALARY AND SUPPLIES NECESSARY FOR THE RUNNING OF THE YOUTH MINISTRY AT GRACE EPISCOPAL CHURCH
-
- 4b** (Code:) (Expenses \$ including grants of \$) (Revenue \$)
-
- 4c** (Code:) (Expenses \$ including grants of \$) (Revenue \$)
-
- 4d** Other program services. (Describe in Schedule O.)
 (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)
-
- 4e** Total program service expenses ▶ 40,712

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)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2	X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a	X
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c	X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e	X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	X
b Did the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c 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? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
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? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38 X	

Part V**Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V. ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	0
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a	0
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	2b	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b	
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	X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
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	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
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	X
9	Sponsoring organizations maintaining donor advised funds.		
a	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:		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
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.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a	
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	13b	
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	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

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. Check if Schedule O contains a response or note to any line in this Part VI. ☒ X

Section 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	1	
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		
b Enter the number of voting members included in line 1a, above, who are independent	1	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
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?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?		X
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?		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?		X
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?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official.		X
b Other officers or key employees of the organization		X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
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?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ MI

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

☐ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. ▶ Wells Fargo Bank N.A. 888-730-4933
1 W 4TH ST 4TH FLOOR, WINSTON SALEM, NC 27101-3818

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) WELLS FARGO BANK NA TRUSTEE	4 00		X					11,871		
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										

1b Sub-total	11,871	0	0
c Total from continuation sheets to Part VII, Section A	0	0	0
d Total (add lines 1b and 1c)	11,871	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		0
		0
		0
		0
		0

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII. ☐

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 0			
	b Membership dues	1b 0			
	c Fundraising events	1c 0			
	d Related organizations	1d 0			
	e Government grants (contributions)	1e 0			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 0			
	g Noncash contributions included in lines 1a-1f: \$	0			
	h Total. Add lines 1a-1f	0			
Program Service Revenue	Business Code				
	2a	0			
	b	0			
	c	0			
	d	0			
	e	0			
	f All other program service revenue	0			
	g Total. Add lines 2a-2f	0			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	12,400			12,400
	4 Income from investment of tax-exempt bond proceeds	0			
	5 Royalties	0			
	6a Gross rents				
	b Less: rental expenses				
	c Rental income or (loss)	0			
	d Net rental income or (loss)	0			
	7a Gross amount from sales of assets other than inventory	372,878	0		
	b Less: cost or other basis and sales expenses	335,931	0		
	c Gain or (loss)	36,947	0		
	d Net gain or (loss)	36,947			36,947
	8a Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18	0			
	b Less: direct expenses	0			
	c Net income or (loss) from fundraising events	0			
	9a Gross income from gaming activities. See Part IV, line 19	0			
	b Less: direct expenses	0			
	c Net income or (loss) from gaming activities	0			
	10a Gross sales of inventory, less returns and allowances	0			
	b Less: cost of goods sold	0			
	c Net income or (loss) from sales of inventory	0			
Miscellaneous Revenue		Business Code			
11a	0				
b	0				
c	0				
d All other revenue	0				
e Total. Add lines 11a-11d	0				
12 Total revenue. See instructions	49,347	0	0	49,347	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX. ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	37,144	37,144		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	0			
c	Accounting	600	600		
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
12	Advertising and promotion	0			
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	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 (A) amount, list line 24e expenses on Schedule O)				
a	TRUSTEE FEES	11,871	2,968	8,903	
b	FOREIGN TAXES PAID	610		610	
c	ADR FEES	4		4	
d		0			
e	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	50,229	40,712	9,517	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing		1	2,517
	2 Savings and temporary cash investments	28,163	2	28,517
	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		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use		8	0
	9 Prepaid expenses and deferred charges		9	0
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 0		
	b Less: accumulated depreciation	10b 0	10c	0
	11 Investments—publicly traded securities	684,719	11	681,362
	12 Investments—other securities. See Part IV, line 11	0	12	0
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	0	15	0
16 Total assets. Add lines 1 through 15 (must equal line 34)	712,882	16	712,396	
Liabilities	17 Accounts payable and accrued expenses		17	0
	18 Grants payable		18	
	19 Deferred revenue		19	0
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25	0	26	0
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	712,882	30	712,396
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	712,882	33	712,396	
34 Total liabilities and net assets/fund balances	712,882	34	712,396	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	49,347
2	Total expenses (must equal Part IX, column (A), line 25)	2	50,229
3	Revenue less expenses. Subtract line 2 from line 1	3	-882
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	712,882
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	396
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	712,396

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990. <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
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		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

GRACE EPISCOPAL YOUTH MINISTRY TR

Employer identification number

43-6812820

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 ☒ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 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(a)(2).**
 - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box. ☒
 - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		<input checked="" type="checkbox"/>
(ii) A family member of a person described in (i) above?		<input checked="" type="checkbox"/>
(iii) A 35% controlled entity of a person described in (i) or (ii) above?		<input checked="" type="checkbox"/>
 - h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A) GRACE EPISCOPAL C	38-1410473	1	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		11,871
(B)									
(C)									
(D)									
(E)									
Total	1								11,871

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

Schedule A (Form 990 or 990-EZ) 2013

HTA

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						0
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	0	0	0	0	0	0
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	0	0	0	0	0	0
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0
11 Total support. Add lines 7 through 10						0
12 Gross receipts from related activities, etc. (see instructions)					12	
13 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) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	0 00%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	0 00%
16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2012. 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 supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						0
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						0
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	0	0	0	0	0	0
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6.)						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0
13 Total support. (Add lines 9, 10c, 11, and 12.)	0	0	0	0	0	0
14 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) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	0.00%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	0.00%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	0.00%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	0.00%

19a 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

Part IV

Supplemental Information. 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).

Area with horizontal dashed lines for supplemental information.

SCHEDULE I
(Form 990)

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

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

OMB No 1545-0047

2013

Department of the Treasury
Internal Revenue Service

Open to Public
Inspection

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number

GRACE EPISCOPAL YOUTH MINISTRY TR

43-6812820

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II 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 recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(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
(1) GRACE EPISCOPAL CHURCH 1213 SIXTH STREET PORT HURON	38-1410473	501(C)(3)	37,144				GENERAL SUPPORT GRANT
(2) -----							
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							
(8) -----							
(9) -----							
(10) -----							
(11) -----							
(12) -----							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	1
3 Enter total number of other organizations listed in the line 1 table	0

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

Schedule I (Form 990) (2013)

HTA

Part III

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

Part III can be duplicated if additional space is needed.					
(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
1					
2					
3					
4					
5					
6					
7					

Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information
----------------	---

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Part I Line 2 THE ORGANIZATION CONTRIBUTES TO A PRE-SELECTED ORGANIZATION

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service
Name of the organization

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

GRACE EPISCOPAL YOUTH MINISTRY TR

Employer identification number

43-6812820

Form 990, Part VI, Section B, Line 11A: SOLE TRUSTEE RECEIVES AND REVIEWS THE FORM 990

Form 990, Part VI, Section B, Line 12C: ORGANIZATION COMPLIES WITH THE SAME POLICY AND

ENFORCEMENT PROCEDURES AS ITS TRUSTEE

Form 990, Part VI, Section C, Line 19: NO DOCUMENTS AVAILABLE TO THE PUBLIC

Form 990, Part XI, Line 9: NET ADJUSTMENTS INCLUDE MUTUAL FUND & CTF INCOME ADJUSTMENTS, PY

RETURN OF CAPITAL ADJUSTMENT, AND COST BASIS ADJUSTMENT

Employer identification number

43-6812820

[illegible]

Security Type	FIN	CUSIP	Asset Name	FMV	Fed Cost
Invest - Corp Stock	43-6812820	001055102	AFLAC INC	3473.6	2492.88
Invest - Corp Stock	43-6812820	008252108	AFFILIATED MANAGERS GROUP, INC COM	3253.2	1486.8
Invest - Corp Stock	43-6812820	037411105	APACHE CORP	2921.96	3507.78
Invest - Corp Stock	43-6812820	037833100	APPLE INC	7293.26	7065.11
Invest - Other	43-6812820	04314H204	ARTISAN INTERNATIONAL FUND #661	53803.54	39646.57
Invest - Corp Stock	43-6812820	071813109	BAXTER INTL INC	3407.95	3412.17
Invest - Corp Stock	43-6812820	097023105	BOEING CO	3958.21	2180.51
Invest - Corp Stock	43-6812820	126650100	CVS/CAREMARK CORPORATION	3650.07	2298.56
Invest - Corp Stock	43-6812820	14040H105	CAPITAL ONE FINANCIAL CORP	3370.84	2218.48
Invest - Corp Stock	43-6812820	17275R102	CISCO SYSTEMS INC	4149.55	2882.3
Invest - Corp Stock	43-6812820	231071106	CUMMINS INC.	2537.46	2382.89
Invest - Corp Stock	43-6812820	25243Q205	DIAGEO PLC - ADR	3045.66	978.27
Invest - Corp Stock	43-6812820	254687106	WALT DISNEY CO	5042.4	2806.31
Invest - Other	43-6812820	256210105	DODGE & COX INCOME FD COM #147	12108.94	12100
Invest - Corp Stock	43-6812820	268648102	E M C CORP MASS	2188.05	2348.13
Invest - Corp Stock	43-6812820	375558103	GILEAD SCIENCES INC	3755	1157.75
Invest - Corp Stock	43-6812820	459200101	INTERNATIONAL BUSINESS MACHS CORP	2438.41	2668
Invest - Corp Stock	43-6812820	478366107	JOHNSON CONTROLS INC	3847.5	2336.05
Invest - Other	43-6812820	589509108	MERGER FD SH BEN INT #260	23721.9	23725.6
Invest - Corp Stock	43-6812820	594918104	MICROSOFT CORP	2805.75	1902
Invest - Corp Stock	43-6812820	637071101	NATIONAL OILWELL INC COM	3260.73	2907.1
Invest - Corp Stock	43-6812820	641069406	NESTLE S.A. REGISTERED SHARES - ADR	3090.78	2608.2
Invest - Corp Stock	43-6812820	68389X105	ORACLE CORPORATION	2754.72	2299.68
Invest - Other	43-6812820	693390700	PIMCO TOTAL RET FD-INST #35	4007.5	4000
Invest - Corp Stock	43-6812820	806857108	SCHLUMBERGER LTD	4145.06	3959.84
Invest - Corp Stock	43-6812820	872540109	TIX COS INC NEW	3823.8	1659.3
Invest - Corp Stock	43-6812820	883556102	THERMO FISHER SCIENTIFIC INC	2449.7	1255.32
Invest - Corp Stock	43-6812820	89151E109	TOTAL S.A. - ADR	3063.5	2605.49
Invest - Corp Stock	43-6812820	907818108	UNION PACIFIC CORP	4200	2526.25
Invest - Corp Stock	43-6812820	58155Q103	MCKESSON CORP	3873.6	2275.81
Invest - Corp Stock	43-6812820	38141G104	GOLDMAN SACHS GROUP INC	2836.16	2011.2
Invest - Corp Stock	43-6812820	404280406	HSBC - ADR	1929.55	1909.72
Invest - Corp Stock	43-6812820	911312106	UNITED PARCEL SERVICE-CL B	3152.4	2317.2
Invest - Corp Stock	43-6812820	87612E106	TARGET CORP	4049.28	3689.45
Invest - Corp Stock	43-6812820	91324P102	UNITEDHEALTH GROUP INC	4593.3	3410.51
Invest - Other	43-6812820	04314H600	ARTISAN MID CAP FUND-INS #1333	42254.49	32073.53
Invest - Other	43-6812820	315920702	FID ADV EMER MKTS INC- CL I #607	12072.87	12100

Invest - Corp Stock	43-6812820	189754104	COACH INC	2974.89	2937.24
Invest - Corp Stock	43-6812820	088606108	BHP BILLITON LIMITED - ADR	1841.4	2458.08
Invest - Corp Stock	43-6812820	46625H100	JPMORGAN CHASE & CO	4502.96	3420.34
Invest - Corp Stock	43-6812820	902973304	US BANCORP DEL NEW	3353.2	2469.24
Invest - Corp Stock	43-6812820	03524A108	ANHEUSER-BUSCH INBEV SPN ADR	3300.26	2117.92
Savings & Temp Inv	43-6812820	VP6000104	FEDERATED GOVT OBLIGATION #5	24365.22	24365.22
Savings & Temp Inv	43-6812820	VP6000104	FEDERATED GOVT OBLIGATION #5	4152.25	4152.25
Invest - Other	43-6812820	256206103	DODGE & COX INT'L STOCK FD #1048	53841.83	40489.64
Invest - Corp Stock	43-6812820	166764100	CHEVRON CORP	3122.75	932.53
Invest - Other	43-6812820	261980494	DREYFUS EMG MKT DEBT LOC C-I #6083	19913.35	20100
Invest - Corp Stock	43-6812820	88579Y101	3M CO	3646.5	2461.42
Invest - Other	43-6812820	339128100	JP MORGAN MID CAP VALUE-I #758	27767.98	20119.49
Invest - Corp Stock	43-6812820	084670702	BERKSHIRE HATHAWAY INC.	4979.52	1719.22
Invest - Corp Stock	43-6812820	20030N101	COMCAST CORP CLASS A	4468.99	2074.32
Invest - Other	43-6812820	63872T885	ASG GLOBAL ALTERNATIVES-Y #1993	30970.1	31295.25
Invest - Corp Stock	43-6812820	38259P508	GOOGLE INC	4482.84	2493.48
Invest - Other	43-6812820	922908553	VANGUARD REIT VIPER	31957.2	28660.88
Invest - Other	43-6812820	88019R690	TEMPLETON EMER MKT S/C-ADV #626	8104.91	7700
Invest - Other	43-6812820	00203H859	AQR MANAGED FUTURES STR-I #15213	8112.26	7736.9
Invest - Corp Stock	43-6812820	150870103	CELANESE CORP	2544.26	2400.68
Invest - Other	43-6812820	922042858	VANGUARD FTSE EMERGING MARKETS ETF	47311	52746.89
Invest - Corp Stock	43-6812820	611740101	MONSTER BEVERAGE CORP	2643.03	1750.61
Invest - Other	43-6812820	683974505	OPPENHEIMER DEVELOPING MKT-Y #788	47291.8	41720.22
Invest - Other	43-6812820	044820504	ASHMORE EMERG MKTS CR DB-INS	8100	8100
Invest - Corp Stock	43-6812820	G29183103	EATON CORP PLC	2892.56	1958.57
Invest - Corp Stock	43-6812820	12572Q105	CME GROUP INC	3609.16	2628.79
Invest - Other	43-6812820	78463X863	SPDR DJ WILSHIRE INTERNATIONAL REAL	32589.2	30364.73
Invest - Other	43-6812820	74925K581	ROBECO BP LNG/SHRT RES-INS	40915.82	38052
Invest - Other	43-6812820	40428X222	HSBC FRONTIER MARKETS-I	7819.45	7610
Invest - Other	43-6812820	76628T645	RIDGEWORTH SEIX HY BD-I #5855	24224.77	24200
Invest - Other	43-6812820	483438305	KALMAR GR W/ VAL SM CAP-INS #4	28668.93	22027.42
Invest - Other	43-6812820	22544R305	CREDIT SUISSE COMM RET ST-I #2156	40153.58	46316.4
Invest - Other	43-6812820	487300808	KEELEY SMALL CAP VAL FD CL I #2251	28813.84	19095.03
Cash	43-6812820			2517.25	2517.25
CASH/CASH EQUIVALENTS:				31034.72	31034.72
OTHER ASSETS:				791249.03	681362.05
TOTAL ASSETS:				822283.75	712396.77

Part VIII, Line 7 (990) - Gain/Loss from Sale of Assets Other than Inventory

Total Public Securities											
Total Non-Public Securities											
Total Other Sales											
Gross sales	Cost, other basis and expenses	Gross sales price	Cost or other basis (Enter one field only)	Expense of sale and cost of improvements	Depreciation	Description of Basis Method					
							Cost	Donated value			
372,878	335,931	4,746	6,250								
0	0	850	298								
0	0	830	809								
0	0	1,998	1,859								
0	0	31,187	25,000								
0	0	10,346	8,792								
0	0	5,671	4,932								
0	0	1,042	680								
0	0	583	340								
0	0	2,457	2,399								
0	0	8,712	7,833								
0	0	1,371	1,262								
0	0	9,231	7,177								
0	0	707	756								
0	0	1,145	1,021								
0	0	628	564								
0	0	1,166	373								
0	0	1,190	373								
0	0	3,490	2,644								
0	0	2,282	1,688								
0	0	14,784	14,500								
0	0	7,464	7,392								
0	0	1,141	556								
0	0	797	324								
0	0	858	278								
0	0	641	503								
0	0	916	623								
0	0	1,130	1,312								
0	0	6,594	7,803								
0	0	6,089	6,900								
0	0	3,430	3,627								
0	0	546	616								
0	0	29,735	28,430								
0	0	1,320	1,066								
0	0	521	400								
0	0	2,064	1,813								
0	0	3,997	3,063								
0	0	580	527								
0	0	3,709	3,194								
0	0	5,834	4,734								
0	0	2,407	2,215								
0	0	2,352	1,571								
0	0	1,062	853								
0	0	315	190								
0	0	7,092	7,154								
0	0	905	634								
0	0	685	530								
0	0	500	428								
0	0	6,973	6,757								
0	0	884	807								
0	0	2,710	2,497								
0	0	879	798								
0	0	796	505								
0	0	493	303								
0	0	857	772								
0	0	663	503								

Total Public Securities

Total Non-Public Securities

Total Other Sales

Gross sales	372,878	Cost, other basis and expenses	335,931
	0		0
	0		0

Line	Description	CUSIP #	Check if gain/loss is from sale of securities of public	Check if gain/loss is from sale of non public securities	Check if purchaser is a business	Purchaser	Date acquired	Acquisition method	Date sold	Gross sales price	Cost or other basis (Enter one field only)		Expense of sale and cost of improvements	Depreciation	Description of Basis Method
											Cost	Donated value			
57	VANGUARD FTSE EMERGIN	922042858	X				7/19/2011			1,580	1,666				
58	VANGUARD FTSE EMERGIN	922042858	X				7/19/2011			5,327	6,329				
59	VANGUARD FTSE EMERGIN	922042858	X				7/19/2011			14,196	16,894				
60	VANGUARD REIT VIPER	922908553	X				10/1/2012			1,319	1,224				
61	VADAFONE GROUP PLC NE	92857W209	X				7/19/2011			2,369	2,304				
62	EATON CORP PLC	G29183103	X				12/3/2012			738	620				
63	EATON CORP PLC	G29183103	X				12/3/2012			531	359				
64	ORACLE CORPORATION	68389X105	X				7/19/2011			475	415				
65	OPPENHEIMER DEVELOPIN	683974505	X				3/5/2012			1,645	1,535				
66	OPPENHEIMER DEVELOPIN	683974505	X				2/19/2013			7,960	8,192				
67	OPPENHEIMER DEVELOPIN	683974505	X				3/5/2012			1,932	1,847				
68	OPPENHEIMER DEVELOPIN	683974505	X				3/5/2012			17,300	15,632				
69	SPDR DJ WILSHIRE INTERN	78463X863	X				1/10/2011			2,071	1,903				
70	SCHLUMBERGER LTD	806857108	X				7/19/2011			1,066	1,234				
71	TCW SMALL CAP GROWTH	87234N849	X				7/19/2011			3,052	3,491				
72	TCW SMALL CAP GROWTH	87234N849	X				3/5/2012			24,023	25,500				
73	TCW SMALL CAP GROWTH	87234N849	X				7/6/2012			1,967	1,876				
74	JOHNSON CONTROLS INC	478366107	X				3/1/2012			1,184	1,075				
75	JOHNSON CONTROLS INC	478366107	X				11/14/2013			1,620	1,108				
76	TUX COS INC NEW	872540109	X				7/19/2011			781	415				
77	TARGET CORP	87612E106	X				3/1/2012			1,153	905				
78	TEVA PHARMACEUTICAL IN	881624209	X				7/19/2011			704	858				
79	TEVA PHARMACEUTICAL IN	881624209	X				7/19/2011			2,264	2,717				
80	THERMO FISHER SCIENTIF	883556102	X				3/1/2012			1,023	685				
81	THERMO FISHER SCIENTIF	883556102	X				7/16/2013			699	456				
82	THERMO FISHER SCIENTIF	883556102	X				3/1/2012			710	456				
83	THERMO FISHER SCIENTIF	883556102	X				12/20/2013			542	285				
84	3M CO	88579Y101	X				7/19/2011			1,034	947				
85	3M CO	88579Y101	X				7/19/2011			549	379				
86	US BANCORP DEL NEW	902973304	X				3/1/2012			482	357				
87	UNION PACIFIC CORP	907818108	X				7/19/2011			1,346	1,010				
88	UNION PACIFIC CORP	907818108	X				7/19/2011			1,086	707				
89	TOTAL S A - ADR	89151E109	X				9/20/2012			764	782				
90	US BANCORP DEL NEW	902973304	X				3/1/2012			857	744				
91	AFLAC INC	001055102	X				3/1/2012			767	623				
92	AQR MANAGED FUTURES S	00203H859	X				7/22/2013			7,706	7,484				
93	AFFILIATED MANAGERS GR	008252108	X				2/25/2013			2,150	1,487				
94	AFFILIATED MANAGERS GR	008252108	X				7/19/2011			1,056	496				
95	ANHEUSER-BUSCH INBEV S	03524A108	X				7/16/2013			821	615				
96	ANHEUSER-BUSCH INBEV S	03524A108	X				3/1/2012			517	342				
97	APACHE CORP	037411105	X				3/1/2012			519	654				
98	APPLE INC	037833100	X				7/16/2013			859	1,087				
99	ARTISAN INTERNATIONAL F	04314H204	X				7/19/2011			1,100	991				
100	ARTISAN INTERNATIONAL F	04314H204	X				7/19/2011			4,068	3,591				
101	ARTISAN INTERNATIONAL F	04314H204	X				3/5/2012			4,304	3,764				
102	ARTISAN INTERNATIONAL F	04314H204	X				7/22/2013			903	833				
103	ARTISAN INTERNATIONAL F	04314H204	X				3/5/2012			9,387	7,089				
104	ARTISAN MID CAP FUND-IN	04314H600	X				2/19/2013			1,584	1,422				
105	ARTISAN MID CAP FUND-IN	04314H600	X				2/19/2013			3,638	3,084				
106	BERKSHIRE HATHAWAY INC	084670702	X				4/3/2013			1,170	1,044				
107	BERKSHIRE HATHAWAY INC	084670702	X				4/3/2013			116	104				
108	BERKSHIRE HATHAWAY INC	084670702	X				8/24/1999			349	123				
109	BHP BILLITON LIMITED - AD	088606108	X				7/16/2013			498	728				
110	BOEING CO	097023105	X				3/1/2012			1,148	827				
111	CME GROUP INC	12572Q105	X				7/16/2013			994	710				
112	CME GROUP INC	12572Q105	X				6/2/2012			504	348				

Total Public Public Securities

Total Non-Public Securities

Total Other Sales

Gross sales

372,878

0

0

Cost, other basis and expenses

335,931

0

0

Part VIII, Line 7 (990) - Gain/Loss from Sale of Assets Other than Inventory

Total Public Securities										
Total Non-Public Securities										
Total Other Sales										
Description	CUSIP #	Check if gain/loss is from sale of public securities	Check if gain/loss is from sale of non public securities	Check if purchaser is a business	Purchaser	Date acquired	Acquisition method	Date sold	Gross sales price	Cost or other basis (Enter one field only)
									Cost	Donated value
113 CVS/CAREMARK CORPORA	126650100	X				3/1/2012		7/16/2013	1,033	766
114 CVS/CAREMARK CORPORA	126650100	X				3/1/2012		12/20/2013	493	315
115 CAPITAL ONE FINANCIAL C	14040H105	X				3/1/2012		7/16/2013	1,063	807
116 CELANESE CORP	150870103	X				7/19/2011		7/16/2013	660	746
117 CHEVRON CORP	166764100	X				10/17/2002		7/16/2013	620	187
118 COACH INC	189754104	X				1/9/2013		7/16/2013	698	699
119 COMCAST CORP CLASS A	20030N101	X				7/19/2011		7/16/2013	1,050	579
120 COMCAST CORP CLASS A	20030N101	X				7/19/2011		12/20/2013	511	241
121 LT CAP GAIN DIVIDENDS		X							6,848	
									Expense of sale and cost of improvements	
									Depreciation	
									Description of Basis Method	