

To Every Tribe Ministries
A Non-Profit, Non-Share Corporation
Compilation Report & Form 990 Return
For The Ten Month Period
Ended December 31, 2009 and
The Twelve Month Period
Ended February 28, 2009

FORTENBERRY & BALLARD, PC
Certified Public Accountant

1929 Spillway Road, Suite B
Brandon, MS 39047
(601)992-5292, fax (601)992-2033

Board of Directors
To Every Tribe Ministries
Los Fresnos, TX 78566

We have compiled the accompanying Statements of Financial Position of To Every Tribe Ministries (a not-for-profit 501 c(6) organization) as of December 31, 2009 and February 28, 2009 and the related Statements of Activities and Cash Flows for the ten month period ended December 31, 2009 and the twelve month period ended February 28, 2009, in accordance with Statements on Standards for Accounting and Review Services issued by the American Institute of Certified Public Accountants.

A compilation is limited to presenting in the form of financial statements information that is the representation of management. We have not audited or reviewed the accompanying financial statements and, accordingly, do not express an opinion or any other form of assurance on them.

Generally accepted accounting principles require that fixed assets be depreciated over their estimated useful lives. Management has elected to compute depreciation in accordance with the Modified Accelerated Cost Recovery System required for federal income tax purposes, which does not allocate depreciation over the estimated useful lives of the assets. The effects of this departure from generally accepted accounting principles on financial position, results of operations, and cash flows have not been determined.

The accompanying information, the Form 990, is not a required part of the basic financial statements and is supplementary information presented by To Every Tribe Ministries for purposes of additional analysis although available by filing Form 4506-A. We have not reviewed, or audited this Form 990 and, accordingly, assume only responsibility for the due diligence of the Form 990 preparation.

We are not independent with regards to To Every Tribe Ministries.

FORTENBERRY & BALLARD, PC

May 19, 2010

To Every Tribe Ministries,
A Non-Profit, Non-Share Corporation

Period Ended December 31, 2009

TABLE OF CONTENTS

	<u>Exhibit</u>
Compilation Letter	
Statements of Financial Position	A
Statements of Activities	B
Statements of Changes in Net Assets	C
Statements of Functional Expenses	D
Statements of Cash Flows	E
Notes to the Financial Statements	
<u>Supplementary Data</u>	
Form 990 Informational Return	

To Every Tribe Ministries
A Non-Profit, Non-Share Corporation
Statements of Financial Position
December 31, 2009 and February 28, 2009

Exhibit A

	<u>12 Months</u> <u>12/31/09</u>	<u>10 Months</u> <u>02/28/09</u>
Assets		
Cash	\$ 91,603	\$ 74,647
Accounts Receivable	850	850
Pre-paid Expenses	-	4,481
Capital Assets	<u>513,225</u>	<u>541,976</u>
(net of accumulated		
Total Assets	<u>\$ 605,678</u>	<u>\$ 621,954</u>
 Liabilities		
Total Liabilities	\$ -	\$ -
 Net Assets		
Invested in capital assets, net of related debt	513,228	505,841
Unrestricted	32,978	104,075
Restricted for Ministries	<u>59,472</u>	<u>12,038</u>
Total Net Assets	<u>\$ 605,678</u>	<u>\$ 621,954</u>

The independent accountant's compilation report is an integral part of this statement.

To Every Tribe Ministries
 Statements of Activities
 December 31, 2009 and February 28, 2009

Exhibit B

	10 Months 12/31/09	12 Months 02/28/09
<u>Public Support and Revenue</u>		
Revenue:		
Designated Gifts	\$ 452,989	\$ 509,596
Missions	41,787	49,978
Student Tuition	5,658	53,192
Rent	1,220	-
Financial Aid Gifts	-	8,125
Misc. Contributions-Other	7,990	27,161
	<u>509,643</u>	<u>648,052</u>
<u>Program Expenses and Statement of Functional Expenses</u>		
Advertising	1,193	7,389
Automobile Expense	9,057	11,712
Bank charges	3,409	84
Books for Ministry	4,400	2,412
Contract labor	-	646
Depreciation	30,061	28,023
Equipment Rental	-	102
Finance Charges	25	-
Furnishings	1,814	6,212
Gifts	226	1,294
Honorarium	329,607	373,811
Insurance	11,737	4,862
Language School	1,514	2,640
Licenses & Permits	1,277	330
Maintenance	3,674	260
Meals	7,950	8,090
Medical Supplies	30	568
Membership Fees	269	1,846
Meetings & Conferences	-	50
Mileage Reimbursement	2,653	2,177
Miscellaneous	1,266	14,942
Mission Trips	23,845	44,023
Office Supplies	11,491	3,859
Postage and Delivery	1,877	2,054
Printing and Reproduction	15,333	4,217
Professional development	2,509	1,391
Projects	3,117	2,663
Property Tax	-	823
Small Equipment	5,625	4,610
Taxes	1,754	150
Telephone	2,173	3,492
Translators	1,030	3,250
Travel	13,869	43,759
Utilities	17,343	17,570
Web Hosting	3,130	9,385
Total Program Expenses	<u>513,258</u>	<u>608,696</u>
<u>Management and General</u>		
Administrative Fees	34,396	29,967
Total Management and General Expenses	<u>34,396</u>	<u>29,967</u>
Total Expenses	<u>547,654</u>	<u>638,663</u>
Excess of Revenue over Expenses	(38,011)	9,389
Fund Balance for the 10 months ended December 31, 2009	<u>\$ 605,678</u>	<u>\$ 621,954</u>

The independent accountant's compilation report is an integral part of this statement.

To Every Tribe Ministries
A Non-Profit, Non-Share Corporation
Statements of Changes in Net Assets
December 31, 2009 and February 28, 2009

Exhibit C

	<u>10 Months</u> <u>12/31/09</u>	<u>12 Months</u> <u>02/28/09</u>
Net Assets, Beginning March 1	\$ 621,954	\$ 582,523
Increase in Unrestricted Net Assets	<u>(16,276)</u>	<u>39,430</u>
Net Assets, ending December 31, 2009	<u>\$ 605,678</u>	<u>\$ 621,954</u>

The independent accountant's compilation report is an integral part of this statement.

To Every Tribe Ministries
 Statements of Functional Expenses
 February 28, 2009 and December 31, 2009

Exhibit D

	10 Months 12/31/09	12 Months 02/28/09
<u>Program Services</u>		
Advertising	\$ 1,193	\$ 7,389
Automobile Expense	9,057	11,712
Bank Charges	3,409	84
Books for Ministry	4,400	2,412
Contract labor	-	646
Depreciation	30,061	28,023
Equipment Rental	-	102
Finance Charges	25	-
Furnishings	1,814	6,212
Gifts	226	1,294
Honorarium	329,607	373,811
Insurance	11,737	4,862
Language School	1,514	2,640
Licenses & Permits	1,277	330
Maintenance	3,674	260
Meals	7,950	8,090
Medical Supplies	30	568
Membership Fees	269	1,846
Meeting & Conferences	-	50
Mileage Reimbursement	2,653	2,177
Miscellaneous	1,363	14,942
Mission Trips	23,748	44,023
Office Supplies	11,491	3,859
Postage and Delivery	1,877	2,054
Printing and Reproduction	15,333	4,217
Professional development	2,509	1,391
Projects	3,117	2,663
Property Taxes	-	823
Small Equipment	5,625	4,610
Taxes	1,754	150
Telephone	2,173	3,492
Translators	1,030	3,250
Travel	13,869	43,759
Utilities	17,343	17,570
Web Hosting	3,130	9,385
Total Program Expenses	<u>\$ 513,258</u>	<u>\$ 608,696</u>
<u>Management and General</u>		
Administrative Fees	<u>34,396</u>	<u>29,967</u>
Total Management and General Expenses	<u>34,396</u>	<u>29,967</u>
Total Functional Expenses	<u>\$ 547,654</u>	<u>\$ 638,663</u>

The independent accountant's compilation report is an integral part of this statement.

To Every Tribe Ministries
A Non-Profit, Non-Share Corporation
Cash Flow Statement
December 31, 2009 and February 28, 2009

Exhibit E

	10 Months <u>12/31/09</u>	12 Months <u>02/28/09</u>
Cash Flow from Operating Activities		
Cash received from program sources	\$ 509,643	\$ 648,052
Cash paid for operations	<u>(489,408)</u>	<u>(595,647)</u>
Net Cash Provided (Used) by Operating Activities	20,235	52,405
Cash Flow from Financing Activities		
Acquisition of Capital Assets	<u>(3,279)</u>	<u>(86,136)</u>
Net Cash Provided (Used) by Operating Activities	(3,279)	(86,136)
Net Increase (Decrease) in Cash	16,956	(33,731)
Cash at the Beginning of Year	<u>74,647</u>	<u>108,378</u>
Cash at the End of Year	<u><u>\$ 91,603</u></u>	<u><u>\$ 74,647</u></u>

**Reconciliation of Operating Income to Net Cash
Provided by Operating Activities:**

Operating Income	\$ (38,011)	\$ 9,389
Adjustments to Reconcile Operating Income to Net Cash Provided by Operating Activities		
Depreciation	30,061	43,016
Change in Assets and Liabilities:		
Increase (Decrease) in Liabilities	<u>28,185</u>	<u>-</u>
Total Adjustments	<u>58,246</u>	<u>43,016</u>
Net Cash Provided (Used) by Operating Activities	<u><u>\$ 20,235</u></u>	<u><u>\$ 52,405</u></u>

The independent accountant's compilation report is an integral part of this statement.

To Every Tribe Ministries
A Non-Profit, Non-Share Corporation
Notes to Financial Statements
December 31, 2009

1. Summary of Significant Accounting Policies.

The financial statements of To Every Tribe Ministries has been prepared on the accrual basis of accounting. The significant accounting policies followed are described below. The Organization uses the accrual basis of accounting where revenues are recognized when earned and expenses are recognized at the time liabilities are incurred, regardless of the timing of the related cash flows.

A. Use of Estimates.

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

B. Financial Reporting Entity.

To Every Tribe Ministries is a not-for profit, non-share corporation recognized by the Internal Revenue Service under Section 501c(3) of the Internal Revenue Code as of August 23, 2003. In addition, the Organization qualifies for the charitable contribution deduction under Section 170(b)(1)(a) and has been classified as an organization that is not a private foundation under Section 509(a)(2).

C. Basis of Presentation.

The basic financial statements consist of a Statement of Financial Position, a Statement of Activities, a Statement of Changes in Net Assets, a Statement of Functional Expenses, and a Statement of Cash Flows. The Statement of Financial Position displays information about the entity as a whole. It also presents the financial condition of the entity's activities at year end.

D. Financial Statement Presentation.

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board in its Statement of Financial Accounting Standards (SFAS) No. 117, Financial Statements of Not-for-Profit organizations. Under SFAS No. 117, the Organization is required to report information regarding its financial position and activities according to three classes of net assets: Unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

E. Restricted for Ministries.

The Nets Assets consist of unrestricted and restricted funds. Of the \$74,647 available cash there is \$7,920 restricted for students and \$4,118 for mission trips for a total of \$12,038 in restricted funds.

F. Capital Assets

Capital Assets are reported at actual cost. Contributed assets are reported at estimated fair value at the time received. Depreciation is calculated on the straight-line basis for all assets. There were no Capital Assets of Depreciation for the fiscal year.

G. Other Long-Term Debt

Wells Fargo Bank

To Every Tribe Ministries holds a \$24,000 line of credit. As of December 31, 2009 the amount borrowed and payable on this obligation is \$0. The payments on any indebtedness will be calculated as a percentage over the Bond Market Association index. This debt will be paid out of the general operations account.

Chase Card Services

A credit card line of credit is held by the organization in the amount of \$35,000. As of December 31, 2009 the amount payable is \$0.

H. Contingencies.

As of the date of these financial statements, the Organization has no known contingent liabilities that meet the requirements of SFAS No. 5, Accounting for Contingencies, which states that in order for a liability to be accrued, it must meet two tests; it is probable that a liability has been incurred, and the amount of the liability can be reasonably estimated, Because no potential liability can be reasonably estimated, it does not meet the test of SFAS No. 5; and therefore, no accrual has been made.

2. Cash and Cash Equivalents.

Custodial Credit Risk - Deposits. Custodial credit risk is defined as the risk that, in the event of a financial institutions failure, the entity's deposits may not be returned to it. As of December 31, 2009, the entity reported \$ 91,603.40 cash or cash equivalents. The bank balance was \$ 91,603.40.

Insured	\$ 91,603
Uninsured/Un-collateralized	0
Total	\$ 91,603

3. Capital Assets

	Balance 02/28/09	Additions	Retirements	Balance 12/31/09
Non-depreciable capital assets:	\$ 43,520	0		\$ 43,520
Land				
Total non-depreciable assets	43,520	0		43,520
Depreciable capital assets:				
Buildings	394,711			394,711
Improvements	129,376	3,278		132,654
Furniture	7,036			7,036
Equipment	21,385			21,385
Total depreciable capital assets	552,508	3,278		555,786
Less accumulated deprecaiton for:				
Buildings	(30,137)	(14,353)		(44,490)
Improvements	(4,117)	(1,079)		(5,195)
Furniture	(10,308)	(11,658)		(21,966)
Equipment	(11,459)	(2,972)		(14,430)
	(56,020)	(30,061)		(86,081)
Total depreciable capital assets, net	\$ 540,008	\$ (26,783)		\$ 513,225

4. Change in Fiscal Year

The Internal Revenue Service has approved a change in fiscal year end for To Every Tribe Ministries. The prior year ended February 28, 2009 and the new fiscal year ended December 31, 2009. This change in fiscal year end resulted in a short year accounting period of ten months.

To Every Tribe Ministries
IRS Form 990
for 10 Months and 12 Months ended
December 31, 2009 and February 28, 2009

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2009

Department of the Treasury
Internal Revenue Service

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

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

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 03/01/09, and ending 12/31/09

- B** Check if applicable:
- Address change
 - Name change
 - Initial return
 - Termination
 - Amended return
 - Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
To Every Tribe Ministries

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
32854 Road 1575

City or town, state or country, and ZIP + 4
Los Fresnos TX 78566

D Employer identification number
20-0170786

E Telephone number
956-233-4353

G Gross receipts \$ **509,643**

H(a) Is this a group return for affiliates? Yes No

H(b) Are all affiliates included? Yes No

If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c) (**3**) ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ **www.toeverytribe.com**

H(c) Group exemption number ▶ **N/A**

K Type of organization: Corporation Trust Association Other ▶

L Year of formation:

M State of legal domicile:

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: Purpose is to operate a training center for missionaries, to conduct mission trips and to plant churches.		
	2 Check this box <input type="checkbox"/> 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	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	
	5 Total number of employees (Part V, line 2a)	5	
	6 Total number of volunteers (estimate if necessary)	6	
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	643,849	508,423
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,699	1,220
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	504	
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	648,052	509,643
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ▶		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	638,663	547,654	
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	638,663	547,654	
19 Revenue less expenses. Subtract line 18 from line 12	9,389	-38,011	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	621,954	605,678
	22 Net assets or fund balances. Subtract line 21 from line 20	621,954	19,450

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: **David Sitton** Date: _____

Type or print name and title

Paid Preparer's Use Only

Preparer's signature: _____ Date: **05/21/10** Check if self-employed Preparer's identifying number (see instructions): **P00446709**

Firm's name (or yours if self-employed), address, and ZIP + 4: **Fortenberry & Ballard, PC**
1929 Spillway Road, Suite B
Brandon, MS 39047

EIN ▶ **64-0887736** Phone no. ▶ **601-992-5292**

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

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

Purpose is to operate a training center for missionaries, to conduct mission trips and to plant churches.

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 exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ **448,676** including grants of\$) (Revenue \$)
To train missionaries and conduct mission trips to plant churches.

4b (Code:) (Expenses \$ including grants of\$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of\$) (Revenue \$)

4d Other program services. (Describe in Schedule O.)
(Expenses \$ **64,582** including grants of\$) (Revenue \$)

4e Total program service expenses **513,258**

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)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21; 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		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
	<ul style="list-style-type: none"> ● Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. ● Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. ● Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. ● Did the organization report an amount for other assets related 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. ● Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. ● 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? If "Yes," complete Schedule D, Part X. 		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I		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, Part II		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		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? If "Yes," complete Schedule G, Part II		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X

Part IV Checklist of Required Schedules (continued)

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X
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		
2b	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 this return. (see instructions)		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
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)?		X
4b	If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
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?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?		
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	508,423				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f			508,423			
Program Service Revenue	2a CFCP	Busn. Code	1,220	1,220			
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			1,220			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)						
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross Rents	(i) Real	(ii) Personal				
	b Less: rental exps.						
	c Rental inc. or (loss)						
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis & sales exps.						
	c Gain or (loss)						
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Busn. Code					
11a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total Revenue. See instructions.			509,643	1,220	0	0	

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) but are not required to complete columns (B), (C), and (D).**

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 U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 7				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	29,080	29,080		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	30,064	30,064		
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a Honorarium	364,003	329,607	34,396	
b Mission trips	23,748	23,748		
c Printing Expense	15,333	15,333		
d Travel & Ent	13,869	13,869		
e Office Supplies	11,491	11,491		
f All other expenses	60,066	60,066		
25 Total functional expenses. Add lines 1 through 24f	547,654	513,258	34,396	
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	74,647	1	91,603
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	850	4	850
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	4,481	9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	599,307		
	b	Less: accumulated depreciation	86,082		
	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 equal line 34)	621,954	16	605,678	
Liabilities	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	19,000
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	450
	26	Total liabilities. Add lines 17 through 25		26	19,450
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	621,954	27	586,228
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	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	621,954	33	586,228	
34	Total liabilities and net assets/fund balances	621,954	34	605,678	

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: Cash Accrual Other _____

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

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.

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:

Separate basis Consolidated basis Both consolidated and separate basis

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?

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.

	Yes	No
2a		X
2b		X
2c		
3a		
3b		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2009

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization

To Every Tribe Ministries

Employer identification number

20-0170786

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—Other
- 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?
 - (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?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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 support
			Yes	No	Yes	No	Yes	No	
Total									

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

Schedule A (Form 990 or 990-EZ) 2009

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	684,216	653,465	764,568	648,052	502,766	3,253,067
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	684,216	653,465	764,568	648,052	502,766	3,253,067
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)						619,155
6 Public support. Subtract line 5 from line 4						2,633,912

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	684,216	653,465	764,568	648,052	502,766	3,253,067
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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.)						
11 Total support. Add lines 7 through 10						3,253,067
12 Gross receipts from related activities, etc. (see instructions)					12	1,220
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 2009 (line 6, column (f) divided by line 11, column (f))	14	80.97%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	2.00%
16a 33 1/3 % support test—2009. 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 checked="" type="checkbox"/>		
b 33 1/3 % support test—2008. 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—2009. 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—2008. 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 33 1/3 % support tests—2009. 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—2008. 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

Schedule B
 (Form 990, 990-EZ,
 or 990-PF)
 Department of the Treasury
 Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2009

Name of the organization	Employer identification number
To Every Tribe Ministries	20-0170786

Organization type (check one):

- | | |
|--------------------|---|
| Filers of: | Section: |
| Form 990 or 990-EZ | <input checked="" type="checkbox"/> 501(c)(3) (enter number) organization |
| | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation |
| | <input type="checkbox"/> 527 political organization |
| Form 990-PF | <input type="checkbox"/> 501(c)(3) exempt private foundation |
| | <input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| | <input type="checkbox"/> 501(c)(3) taxable private foundation |

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

- For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization To Every Tribe Ministries	Employer identification number 20-0170786
--	---

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Christ's Covenant Church 2090 E. Pierceton Rd. Winona Lake IL 46590	\$ 11,358	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	Dayspring Fellowship 5500 Ave. G Austin TX 78751	\$ 15,894	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	Kerrville Bible Church 898 Harper Rd Kerrville TX 78028	\$ 11,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	Philadelphia Baptist Church-AL 3001 Pump House Rd Birmingham AL 35243	\$ 23,799	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	Reformed Baptist Church - Lewisburg 830 Buffalo Road Lewisburg PA 17837	\$ 10,373	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

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, 11, or 12.

Attach to Form 990. See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

Employer identification number

To Every Tribe Ministries

20-0170786

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate contributions, aggregate grants, aggregate value, and two yes/no questions about donor advisement.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number of easements, acreage restricted, number of easements on historic structures, and monitoring requirements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures and amounts required to be reported.

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a** Board designated or quasi-endowment ▶ _____ %
- b** Permanent endowment ▶ _____ %
- c** Term endowment ▶ _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		43,520		43,520
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		555,787		555,787
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				599,307

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.

▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

To Every Tribe Ministries

Employer identification number

20-0170786

Form 990, Part III, Line 4d - All Other Achievements

**Purpose is to operate a training center for missionaries,
to conduct mission trips and to plant churches.**

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990

No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

No documents available to the public

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

2009

Attachment
Sequence No. **67**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return

To Every Tribe Ministries

Identifying number

20-0170786

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	250,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	250,000
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	0
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	6,136
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	0
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	0
13	Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12	13	6,136

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	1,639
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	18,157
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property		1,639	15.0	HY	S/L	55
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	19,851
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2009)

DAA

There are no amounts for Page 2

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

2009

Attachment
Sequence No. **67**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return

To Every Tribe Ministries

Identifying number

20-0170786

Business or activity to which this form relates

CPCP

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	250,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12	▶ 13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	10,213
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶		

Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	10,213
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2009)

DAA

There are no amounts for Page 2

20-0170786

Federal Asset Report

FYE: 12/31/2009

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
15-year GDS Property:									
19	Improvements	4/18/09	3,278		X	1,639	15 HY S/L	0	1,694
			<u>3,278</u>			<u>1,639</u>		<u>0</u>	<u>1,694</u>
Prior MACRS:									
1	Deep Freezer	7/06/04	401		X	201	7 HY 200DB	356	18
2	DVD Duplicator	8/05/04	1,500		X	750	5 HY 200DB	1,457	43
3	Computer	7/21/05	1,510			1,510	5 HY 200DB	1,249	174
4	Projector	7/25/05	1,104			1,104	7 HY 200DB	759	99
5	Trailer	9/14/05	2,184			2,184	7 HY 200DB	1,502	195
6	Beds	10/12/06	4,583			4,583	5 MQ200DB	3,016	627
7	Furniture	10/31/06	693			693	5 MQ200DB	456	95
8	Furniture	12/05/06	980			980	5 MQ200DB	645	134
9	Building	9/01/06	281,039			281,039	27 MMS/L	23,420	10,220
11	A-10 Trailer	1/16/07	1,630		X	0	7 HY 200DB	1,630	0
12	Satellite Phone	3/18/07	907		X	0	5 HY 200DB	907	0
13	Ox Cargo Trailer	3/29/07	3,000		X	0	7 HY 200DB	3,000	0
14	IN34 Projector	12/17/07	599		X	0	5 HY 200DB	599	0
15	Improvements	3/01/08	58,285		X	58,285	15 HY S/L	0	3,886
16	Furniture	3/01/08	780		X	780	7 HY 200DB	0	223
17	Equipment	3/01/08	8,551		X	8,551	7 HY 200DB	0	2,443
			<u>367,746</u>			<u>360,660</u>		<u>38,996</u>	<u>18,157</u>
Other Depreciation:									
10	Land	9/01/06	25,000			25,000	0 -- Land	0	0
18	Land	3/01/08	18,520			18,520	0 -- Land	0	0
	Total Other Depreciation		<u>43,520</u>			<u>43,520</u>		<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>43,520</u>			<u>43,520</u>		<u>0</u>	<u>0</u>
	Grand Totals		414,544			405,819		38,996	19,851
	Less: Dispositions and Transfers		0			0		0	0
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>414,544</u>			<u>405,819</u>		<u>38,996</u>	<u>19,851</u>

20-0170786

Federal Asset Report

FYE: 12/31/2009

CPCP

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS:									
1	Improvements	12/26/07	1,192			1,192	15 HY 150DB	173	102
2	Improvements	12/26/07	2,616			2,616	15 HY 150DB	379	224
3	Duplexes	5/22/07	113,672			113,672	27 MMS/L	6,717	4,134
4	Improvements	6/26/07	67,283			67,283	15 HY 150DB	9,756	5,753
			<u>184,763</u>			<u>184,763</u>		<u>17,025</u>	<u>10,213</u>
	Grand Totals		184,763			184,763		17,025	10,213
	Less: Dispositions and Transfers		0			0		0	0
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>184,763</u>			<u>184,763</u>		<u>17,025</u>	<u>10,213</u>

20-0170786

AMT Asset Report

FYE: 12/31/2009

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
15-year GDS Property:										
19	Improvements	4/18/09	3,278			X	1,639	15 HY S/L	0	1,694
			<u>3,278</u>				<u>1,639</u>		<u>0</u>	<u>1,694</u>
Prior MACRS:										
1	Deep Freezer	7/06/04	401			X	201	7 HY 200DB	356	18
2	DVD Duplicator	8/05/04	1,500			X	750	5 HY 200DB	1,457	43
3	Computer	7/21/05	1,510				1,510	5 HY 150DB	1,133	252
4	Projector	7/25/05	1,104				1,104	7 HY 150DB	631	135
5	Trailer	9/14/05	2,184				2,184	7 HY 150DB	1,248	267
6	Beds	10/12/06	4,583				4,583	5 MQ 150DB	2,422	751
7	Furniture	10/31/06	693				693	5 MQ 150DB	366	114
8	Furniture	12/05/06	980				980	5 MQ 150DB	518	161
9	Building	9/01/06	281,039				281,039	27 MMS/L	23,420	10,220
11	A-10 Trailer	1/16/07	1,630				1,630	7 HY 150DB	486	246
12	Satellite Phone	3/18/07	907				907	5 HY 150DB	367	162
13	Ox Cargo Trailer	3/29/07	3,000		X		0	7 HY 150DB	3,000	0
14	IN34 Projector	12/17/07	599		X		0	5 HY 150DB	599	0
15	Improvements	3/01/08	58,285			X	29,142	15 HY S/L	30,114	1,943
16	Furniture	3/01/08	780			X	390	7 HY 200DB	446	95
17	Equipment	3/01/08	8,551			X	4,275	7 HY 200DB	4,886	1,047
			<u>367,746</u>				<u>329,388</u>		<u>71,449</u>	<u>15,454</u>
Other Depreciation:										
10	Land	9/01/06	0				0	0 HY	0	0
18	Land	3/01/08	0				0	0 HY	0	0
	Total Other Depreciation		<u>0</u>				<u>0</u>		<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>0</u>				<u>0</u>		<u>0</u>	<u>0</u>
	Grand Totals		371,024				331,027		71,449	17,148
	Less: Dispositions and Transfers		<u>0</u>				<u>0</u>		<u>0</u>	<u>0</u>
	Net Grand Totals		<u>371,024</u>				<u>331,027</u>		<u>71,449</u>	<u>17,148</u>

20-0170786

AMT Asset Report

FYE: 12/31/2009

CPCP

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS:									
1	Improvements	12/26/07	1,192			1,192	15 HY 150DB	173	102
2	Improvements	12/26/07	2,616			2,616	15 HY 150DB	379	224
3	Duplexes	5/22/07	113,672			113,672	27 MMS/L	6,717	4,134
4	Improvements	6/26/07	67,283			67,283	15 HY 150DB	9,756	5,753
			<u>184,763</u>			<u>184,763</u>		<u>17,025</u>	<u>10,213</u>
	Grand Totals		184,763			184,763		17,025	10,213
	Less: Dispositions and Transfers		0			0		0	0
	Net Grand Totals		<u>184,763</u>			<u>184,763</u>		<u>17,025</u>	<u>10,213</u>

20-0170786

Bonus Depreciation Report

FYE: 12/31/2009

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
Activity: Form 990, Page 1								
1	Deep Freezer	7/06/04	401		0	0	200	201
2	DVD Duplicator	8/05/04	1,500		0	0	750	750
15	Improvements	3/01/08	58,285		0	0	0	58,285
16	Furniture	3/01/08	780		0	0	0	780
17	Equipment	3/01/08	8,551		0	0	0	8,551
19	Improvements	4/18/09	3,278		0	1,639	0	1,639
	Form 990, Page 1		<u>72,795</u>		<u>0</u>	<u>1,639</u>	<u>950</u>	<u>70,206</u>
	Grand Total		<u>72,795</u>		<u>0</u>	<u>1,639</u>	<u>950</u>	<u>70,206</u>

20-0170786

Depreciation Adjustment Report

FYE: 12/31/2009

All Business ActivitiesAMT
Adjustments/
Preferences

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	
MACRS Adjustments:						
Page 1	1	1	Deep Freezer	18	18	0
Page 1	1	2	DVD Duplicator	43	43	0
Page 1	1	3	Computer	174	252	-78
Page 1	1	4	Projector	99	135	-36
Page 1	1	5	Trailer	195	267	-72
Page 1	1	6	Beds	627	751	-124
Page 1	1	7	Furniture	95	114	-19
Page 1	1	8	Furniture	134	161	-27
Page 1	1	9	Building	10,220	10,220	0
Page 1	1	11	A-10 Trailer	0	246	-246
Page 1	1	12	Satellite Phone	0	162	-162
Page 1	1	13	Ox Cargo Trailer	0	0	0
Page 1	1	14	IN34 Projector	0	0	0
Page 1	1	15	Improvements	3,886	1,943	1,943
Page 1	1	16	Furniture	223	95	128
Page 1	1	17	Equipment	2,443	1,047	1,396
Page 1	1	19	Improvements	1,694	1,694	0
Rental	1	1	Improvements	102	102	0
Rental	1	2	Improvements	224	224	0
Rental	1	3	Duplexes	4,134	4,134	0
Rental	1	4	Improvements	5,753	5,753	0
				<u>30,064</u>	<u>27,361</u>	<u>2,703</u>

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
<u>Prior MACRS:</u>					
1	Deep Freezer	7/06/04	401	18	18
2	DVD Duplicator	8/05/04	1,500	0	0
3	Computer	7/21/05	1,510	87	125
4	Projector	7/25/05	1,104	98	135
5	Trailer	9/14/05	2,184	195	268
6	Beds	10/12/06	4,583	501	752
7	Furniture	10/31/06	693	76	113
8	Furniture	12/05/06	980	107	160
9	Building	9/01/06	281,039	10,219	10,219
11	A-10 Trailer	1/16/07	1,630	0	199
12	Satellite Phone	3/18/07	907	0	151
13	Ox Cargo Trailer	3/29/07	3,000	0	0
14	IN34 Projector	12/17/07	599	0	0
15	Improvements	3/01/08	58,285	3,626	1,943
16	Furniture	3/01/08	780	159	68
17	Equipment	3/01/08	8,551	1,745	748
19	Improvements	4/18/09	3,278	109	109
			<u>371,024</u>	<u>16,940</u>	<u>15,008</u>
<u>Other Depreciation:</u>					
10	Land	9/01/06	25,000	0	0
18	Land	3/01/08	18,520	0	0
	Total Other Depreciation		<u>43,520</u>	<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>43,520</u>	<u>0</u>	<u>0</u>
	Grand Totals		<u>414,544</u>	<u>16,940</u>	<u>15,008</u>

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
<u>Prior MACRS:</u>					
1	Improvements	12/26/07	1,192	92	92
2	Improvements	12/26/07	2,616	201	201
3	Duplexes	5/22/07	113,672	4,133	4,133
4	Improvements	6/26/07	67,283	5,177	5,177
			<u>184,763</u>	<u>9,603</u>	<u>9,603</u>
	Grand Totals		<u>184,763</u>	<u>9,603</u>	<u>9,603</u>

20-0170786

Federal Statements

FYE: 12/31/2009

Form 990, Part IX, Line 24f - All Other Expenses

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
Automobile expense	\$ 9,057	\$ 9,057	\$	\$
Meals	7,950	7,950		
Small equipment	5,625	5,625		
Books for Ministry	4,400	4,400		
Bank charges	3,409	3,409		
Web Hosting & Web Site Projects	3,130	3,130		
Mileage Reimbursement	3,117	3,117		
Professional development	2,653	2,653		
Telephone	2,509	2,509		
Maintenance	2,173	2,173		
Postage	1,983	1,983		
Furnishing	1,877	1,877		
Payroll tax	1,814	1,814		
Language School	1,754	1,754		
License & Permits	1,514	1,514		
Miscellaneous	1,277	1,277		
Advertising	1,266	1,266		
Translators	1,193	1,193		
Pest Control	1,030	1,030		
Yard Work	930	930		
Membership Fees	485	485		
Gift	269	269		
Repairs	226	226		
Professional fees	209	209		
Repairs	86	86		
Medical Supplies	50	50		
Finance Charges	30	30		
Materials	25	25		
Sales Tax	17	17		
	8	8		
Total	<u>\$ 60,066</u>	<u>\$ 60,066</u>	<u>\$ 0</u>	<u>\$ 0</u>

Federal Statements

Schedule A, Part II, Line 5 - Excess Gifts

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
	\$ 684,216	\$ 619,155
Total	<u>\$ 684,216</u>	<u>\$ 619,155</u>

Forms 990 / 990-EZ Return Summary

For calendar year 2009, or tax year beginning **03/01/09** , and ending **12/31/09**

20-0170786

To Every Tribe Ministries

Net Asset / Fund Balance at Beginning of Year		<u>621,954</u>
Revenue		
Contributions	<u>508,423</u>	
Program service revenue	<u>1,220</u>	
Investment income	_____	
Capital gain / loss	_____	
Special events:		
Gross revenue	_____	
Direct expenses	_____	
Net income	_____	
Other income	<u>0</u>	
Total revenue		<u>509,643</u>
Expenses		
Program services	<u>513,258</u>	
Management and general	<u>34,396</u>	
Fundraising	_____	
Total expenses		<u>547,654</u>
Excess / (deficit)		<u>-38,011</u>
Other changes		_____
Net Asset / Fund Balance at End of Year		<u><u>586,228</u></u>

Reconciliation of Revenue

Total revenue per financial statements	_____
Less:	
Unrealized gains	_____
Donated services	_____
Recoveries	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
Total revenue per return	<u><u>509,643</u></u>

Reconciliation of Expenses

Total expenses per financial statements	_____
Less:	
Donated services	_____
Prior year adjustments	_____
Losses	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
Total expenses per return	<u><u>547,654</u></u>

Balance Sheet

	Beginning	Ending	Differences
Assets	<u>621,954</u>	<u>605,678</u>	
Liabilities	_____	<u>19,450</u>	
Net assets	<u><u>621,954</u></u>	<u><u>586,228</u></u>	<u><u>-35,726</u></u>

Miscellaneous Information

Amended return _____
Return / extended due date 08/15/10
Failure to file penalty _____