Biblical Business Training, Inc. Return of Organization Exempt From Income Tax June 30, 2013

OPEN TO PUBLIC INSPECTION

Department of the Treasury

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

benefit trust or private foundation)

Open to Public

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

Inspection

A	For the 2	012 calendar year, or tax year beginning $\mathrm{JUL}1$, 2012	JUN 30, 2013	100000000000000000000000000000000000000
В	Check if	C Name of organization	D Employer identif	ication number
	applicable:		, , , , , , , , , , , , , , , , , , , ,	
	Address	MINISTRIES AT WORK, INC.		
	Name change	Doing Business As	27-0	392335
Ē	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/s		
Ē	Termin- ated	17209 CHESTERFIELD AIRPORT ROAD #270		276-9088
	Amended	City, town, or post office, state, and ZIP code	G Gross receipts \$	211,454.
	Applica-	CHESTERFIELD, MO 63005	H(a) Is this a group r	
	pending	F Name and address of principal officer:BRANDON MANN	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates in	cluded? Yes No
L	Tax-exem	pt status: X 501(c)(3)	527 If "No," attach a	list. (see instructions)
J	Website:	▶ WWW.MINISTRIESATWORK.ORG	H(c) Group exemption	on number
K	Form of or	ganization: X Corporation	ear of formation: 2009	VI State of legal domicile: MO
P	art I S	ummary		
9	1 Br	efly describe the organization's mission or most significant activities: HELPING	PEOPLE APPLY	BIBLICAL
J.C	P	RINCIPLES AT WORK WITH THE VISION OF SEEING		
šrnš	2 Ch	eck this box 🕨 🔲 if the organization discontinued its operations or disposed of r	nore than 25% of its net a	ssets.
ŏ.	3 Nu	Imber of voting members of the governing body (Part VI, line 1a)		5
න	4 Nu	mber of independent voting members of the governing body (Part VI, line 1b)		3
es	5 To	tal number of individuals employed in calendar year 2012 (Part V, line 2a)		4
V:	6 To	tal number of volunteers (estimate if necessary)	6	126
Activities & Governance	7 a To	tal unrelated business revenue from Part VIII, column (C), line 12		0.
_	b Ne	t unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue			Prior Year	Current Year
	8 Cc	ontributions and grants (Part VIII, line 1h)	196,770.	209,240.
	9 Pro	ogram service revenue (Part VIII, line 2g)	0.	0.
ě	10 Inv	restment income (Part VIII, column (A), lines 3, 4, and 7d)	-86.	-19.
ш,	11 Ot	her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12 To	tal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	196,684.	209,221.
		ants and similar amounts paid (Part IX, column (A), lines 1·3)	0.	0.
	14 Be	nefits paid to or for members (Part IX, column (A), line 4)	0.	0.
es	15 Sa	laries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	216,692.	204,132.
Expenses	16a Pro	ofessional fundraising fees (Part IX, column (A), line 11e)	0.	0.
ž	b To	tal fundraising expenses (Part IX, column (D), line 25) 16,574.		
ш	17 Ot	her expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	57,869.	
		tal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	274,561.	241,087.
	19 Re	venue less expenses. Subtract line 18 from line 12	-77,877.	
Net Assets or	3		Beginning of Current Year	End of Year
SSE	20 To	tal assets (Part X, line 16)	84,851.	52,793.
et A	21 To	tal liabilities (Part X, line 26)	1,215.	1,023.
24		t assets or fund balances. Subtract line 21 from line 20	83,636.	51,770.
****		Signature Block		
	-	s of perjury, I declare that I have examined this return, including accompanying schedules and sta		ly knowledge and belief, it is
true	, correct, a	nd complete. Declaration of preparer (other than officer) is based on all information of which prep	arer nas any knowledge.	
٥.		Signature of officer	Date	
Sig	100		Duto	
He	re	BRANDON MANN, CEO Type or print name and title		
	D		Date Check	PTIN
Dai		rint/Type preparer's name EANETTE BAX-KURTZ Preparer's signature JEANETTE BAX-KURTZ	1112-121	
Pai		*		43-1594752
			Firm's EIN ▶	43-1374/32
036	July 1	rm's address 7733 FORSYTH BLVD., SUITE 1200 ST. LOUIS, MO 63105	Dhana na 1/	314) 862-2070
NA.	w the IDO	discuss this return with the preparer shown above? (see instructions)	Phone no. (X Yes No

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)

OMB No. 1545-0047 Open to Public

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection JUL 1, 2012 and ending JUN 30, A For the 2012 calendar year, or tax year beginning

В	Check if applicable:	C Name of organization	D Employer identifi	cation number
	Address change	MINISTRIES AT WORK, INC.		
F	Name change	Doing Business As	- 27-0	392335
F	Initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/su		
Ē	Termin-	17209 CHESTERFIELD AIRPORT ROAD #270	314-	276-9088
	Amende return	City, town, or post office, state, and ZIP code	G Gross receipts \$	211,454.
	Applica- tion	CHESTERFIELD, MO 63005	H(a) Is this a group re	eturn
	pending	F Name and address of principal officer:BRANDON MANN	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates inc	cluded? Yes No
			If "No," attach a	list. (see instructions)
		:▶ WWW.MINISTRIESATWORK.ORG	H(c) Group exemption	
			ear of formation: 2009	M State of legal domicile: MO
Pá		Summary		D.T.D.T.G.1.
9	1 B	riefly describe the organization's mission or most significant activities: $\frac{\text{HELPING I}}{\text{PRINCIPLES AT WORK WITH THE VISION OF SEEING}}$	PEOPLE APPLY	BIBLICAL THE TENT OF THE TENT
& Governance	_	. []		
Veri		heck this box if the organization discontinued its operations or disposed of m		ssets.
Ĝ	1	umber of voting members of the governing body (Part VI, line 1a)		3
ళ		umber of independent voting members of the governing body (Part VI, line 1b) otal number of individuals employed in calendar year 2012 (Part V, line 2a)		4
iţie		otal number of volunteers (estimate if necessary)		126
Activities		otal unrelated business revenue from Part VIII, column (C), line 12		0.
Ř	1	et unrelated business taxable income from Form 990-T, line 34		0.
	1		Prior Year	Current Year
Revenue	8 c	ontributions and grants (Part VIII, line 1h)	196,770.	209,240.
	1	rogram service revenue (Part VIII, line 2g)	0.	0.
		vestment income (Part VIII, column (A), lines 3, 4, and 7d)	-86.	-19.
Œ	1	ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	196,684.	209,221.
	13 G	rants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14 B	enefits paid to or for members (Part IX, column (A), line 4)	0.	0.
es	15 S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	216,692.	204,132.
Expenses	16a P	rofessional fundraising fees (Part IX, column (A), line 11e)	0.	0.
ă	b T	otal fundraising expenses (Part IX, column (D), line 25) 16,574.	55.060	26.055
ш	17 0	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	57,869.	36,955.
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	274,561.	241,087.
	19 R	evenue less expenses. Subtract line 18 from line 12	-77,877.	-31,866.
ts or		F	Beginning of Current Year	End of Year 52,793.
\sse Bala	20 T	otal assets (Part X, line 16)	84,851. 1,215.	1,023.
Net Assets or Fund Balances	21 T	otal liabilities (Part X, line 26)	83,636.	51,770.
P	22 N art II	et assets or fund balances. Subtract line 21 from line 20	03,030.	31,770
_		es of perjury, I declare that I have examined this return, including accompanying schedules and stat	ements, and to the best of m	v knowledge and belief, it is
		and complete. Declaration of preparer (other than officer) is based on all information of which prepare		,,
	<u> </u>			
Sig	n	Signature of officer	Date	
Her		BRANDON MANN, CEO		
		Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Pai	d [<u>]</u>	EANETTE BAX-KURTZ JEANETTE BAX-KURTZ	if self-employ	
	· _	irm's name MUELLER PROST PC	Firm's EIN	43-1594752
Use	Only	Firm's address 7733 FORSYTH BLVD., SUITE 1200		244 252 25=2
		ST. LOUIS, MO 63105	Phone no. (314) 862-2070
Ma	y the IRS	6 discuss this return with the preparer shown above? (see instructions)		X Yes No

Pai	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	TO ENGAGE IN CHRISTIAN-BASED PUBLIC EDUCATIONAL ACTIVITIES THAT
	PROVIDE BIBLICAL LEADERSHIP DEVELOPMENT AND CURRICULUM TO SMALL-GROUP
	BIBLE STUDY LEADERS, HELPING THEM GROW IN THEIR OWN RELATIONSHIP WITH
	CHRIST AND EQUIPPING THEM TO POUR INTO THE LIVES OF OTHERS.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 202,196 • including grants of \$) (Revenue \$)
	THE MINISTRY FOCUS OF BIBLICAL BUSINESS TRAINING (BBT) IS DEVELOPING
	GROUP LEADERS FOR SMALL-GROUP BIBLE STUDIES. BBT GROUPS MEET AT WORK,
	NEAR WORK (E.G., RESTAURANTS, COFFEE SHOPS, ETC.), OR AT A LOCAL
	CHURCH. BBT PROVIDES LEADERS WITH CURRICULUM (AGENDAS, GROUP LEADER
	GUIDES AND RECAPS) THAT IS FOCUSED ON PRACTICAL WORK SITUATIONS TO HELP
	PARTICIPANTS DIRECTLY APPLY BIBLICAL PRINCIPLES TO WHAT THEY DO EVERY
	DAY. BBT ALSO PROVIDES LEADERS WITH AN INDIVIDUALIZED BIBLICAL LEADERSHIP DEVELOPMENT PROCESS. BBT COACHES WORK WITH GROUP LEADERS TO
	ASSESS, EQUIP AND ENCOURAGE THEM TO LEAD IN EVERY AREA OF LIFE (WE CALL THIS THE LEADERSHIP FLYWHEEL). WE BELIEVE THAT LEADERS WHO ARE GROWING
	IN THEIR RELATIONSHIP WITH CHRIST WILL LEAD THRIVING, CHRIST-CENTERED
	SMALL GROUPS. DURING THE YEAR, MINISTRIES@WORK IMPLEMENTED ADDITIONAL
44	1 150
4b	(Code:) (Expenses \$
	OPPORTUNITY FOR BBTS TO COME TOGETHER IN A LARGER COMMUNITY, AND TO
	PROVIDE A PLATFORM FOR RAISING AWARENESS OF BBT WITH THOSE NOT YET
	INVOLVED IN BBT. THERE WERE APPROXIMATELY 400 ATTENDEES TO THESE
	SPEAKER EVENTS DURING THE YEAR. FURTHERMORE, "PROCLAIM ON CAMPUS"
	COLLABORATES WITH A TEAM OF STUDENT-LEADERS AT THE UNIVERSITY OF
	MISSOURI TO PILOT AN ON-CAMPUS PRESENCE OF MINISTRIES@WORK. THE
	ORGANIZATION HOPES TO FOSTER COLLEGE STUDENTS' INTEREST AND PASSION FOR
	LEARNING TO APPLY BIBLICAL PRINCIPLES WHILE IN COLLEGE, AND UPON
	GRADUATION, PROCLAIM CAN FACILITATE THEIR TRANSITION FROM COLLEGE TO
	THE WORKPLACE.
4c	(Code:) (Expenses \$ including grants of \$)) (Revenue \$)
	· · · · · · · · · · · · · · · · · · ·
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 203,348.
	Form 990 (2012)

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)?		х	
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Λ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	3		21
6	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	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? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			37
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			37
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	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? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		Х
19	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		
ıσ	complete Schedule G, Part III	19		х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
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		Х
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		Х
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	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		Х
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		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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):			
а	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
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
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, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		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 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

Service The number reported in Box 3 of Form 1008. Enter 0- if not applicable		Check if Schedule O contains a response to any question in this Part V					
b Enter the number of Forms W2G included in line 1s. Enter o'. If not applicable in control of the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) wrinings to prize wirmers? 2e Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 4 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b If we call the search of the organization file all required federal employment tax returns? 2c) X Note. If the sum of lines 1s and 2s in greater than 250, you may be required to -6/fee (see instructions) 3b If If we's, in the organization have unrelated business gross income of \$1,000 or more during the year? 3c) If the organization have unrelated business gross income of \$1,000 or more during the year? 3d If we's, in the organization from the year? With "No, "provider an argument on Schedule O 4d At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account or country (such as a bank account, securities account, or other financial accounts? 5d Was the organization appray to a prohibited tax shelter transaction at any time during the tax year? 5d Was the organization appray to a prohibited tax shelter transaction? 5d Was the organization appray to a prohibited tax shelter transaction? 5d Was the organization and party to a prohibited tax shelter transaction? 5d Was the organization and party to a prohibited tax shelter transaction? 5d Was the organization and party to a prohibited tax shelter transaction? 5d Was the organization shelt we went of sacredartable contributions? 5d Was the organization shell we character that are normally greater than \$100,000, and did the organization solicit and any organization shelt were not tax deductibles a character because of sacredartable contributions?						Yes	No
b Enter the number of Forms W2G included in line 1a. Enter o I find applicable OI bit the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a. 4 2b. 2a. 4 2b. 17 Interest of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2b. 18 Interest the unit of lines 1 and 2a is greater than 250, you may be required to e-78 ties entructions? 3b. 10 Interest and of lines 1 and 2a is greater than 250, you may be required to e-78 ties entructions? 3c. 10 Interest and 1 and 2a is greater than 250, you may be required to e-78 ties entructions? 3c. 10 Interest 1 and 1 and 2a is greater than 250, you may be required to e-78 ties entructions? 3c. 10 Interest 1 and 2 and 2a is greater than 250, you may be required to e-78 ties entructions? 3c. 10 Interest 1 and 2 and 2a is greater than 250, you may be required to e-78 ties entructions? 3c. 10 Interest 2 and 2a is greater than 250, you may be required to e-78 ties entructions? 3c. 10 Interest 2 and 2a is greater than 250, you may be replanation in Schedule 0 3c. 10 Interest 2 and 2a is greater than 250, you may be replanation in Schedule 0 3c. 10 Interest 2 and 2a is greater than 250, you may be replanation of schedule 0 3c. 10 Interest 2 and 2a is greater than 250, you may be replanation of schedule 0 3c. 10 Interest 2 and 2a is greater than 250, you may be replanation of schedule 2 and 2a is greater than 250 and 2a is	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0			
gamblingly winnings to prize winners? 2	b		1b	0			
2a Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, Eas 4 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) 3a	С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable	gaming			
2a Earth the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, fleef for the calendar year ending with or within the year covered by this return Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a		(gambling) winnings to prize winners?			1c		
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f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 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. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b Did the organization make any taxable distributions under section 4966? 9 a Did the organization make any taxable distributions under section 4966? 9 a Did the organization make a distribution to a donor, donor advisor, or related person? 9 b Did the organization make a distribution included on Part VIII, line 12 10 a Did the organization server 990, Part VIII, line 12 11 b Gross income from members or shareholders 11 b Gross income from members or shareholders 11 b Did	d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
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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. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12 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. 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 c Enter the amount of reserves on hand 13 C 14 Did the organization receive any payments for indoor tanning services during the tax year? 14 X 15 If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file a	a Form 1098-C?	7h		
9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Initiation fees and capital contributions included on Part VIII, line 12	8	$Sponsoring\ organizations\ maintaining\ donor\ advised\ funds\ and\ section\ 509 (a) (3)\ supporting\ organizations.\ Discovered by the control of the con$	d the supp	orting			
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b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13a 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b	9	Sponsoring organizations maintaining donor advised funds.					
10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12					9a		
a Initiation fees and capital contributions included on Part VIII, line 12	b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
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Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b							
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organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b							
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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 0 14b							
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b			13c				37
							V
	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	eΟ			000	(0040)

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 to any question in this Part VI				X
Sec	tion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	5		
	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	1b	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with any other			
	officer, director, trustee, or key employee?		2	X	
3	Did the organization delegate control over management duties customarily performed by or under the	ne direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person? \dots		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form	990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?	5		Х
6	Did the organization have members or stockholders?		6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint one or			
	more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,				
	persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue Code.)			
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such c				
	and branches to ensure their operations are consistent with the organization's exempt purposes? \dots		10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," describe			
	in Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and approve				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			37	
	The organization's CEO, Executive Director, or top management official		15a	X	
b	Other officers or key employees of the organization		15b	X	
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
тба	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange				v
	taxable entity during the year?		16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluation to ev				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nization's			
<u></u>	exempt status with respect to such arrangements?		16b		
	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► NONE				
17		F (Oti FO4(-)(O)		.1-	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	i (Section 501(c)(3)s only)	avallat	эіе	
	for public inspection. Indicate how you made these available. Check all that apply.	in Cabadida O			
40	·	in Schedule O)	I &! ·	!-!	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	onflict of interest policy, a	na tinai	ıcıal	
00	statements available to the public during the tax year.	nd records of the areast-	otio:-: ►		
20	State the name, physical address, and telephone number of the person who possesses the books a BRANDON MANN, CEO $-314-276-9088$	ina records of the organiz	auon:	_	
	1076 NOONING TREE DRIVE, CHESTERFIELD, MO 63017				
232000			Form	1 990	(2012
12- IU-	16		ı UIII		12012

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization		orga T					แรส	(D)	(E)	(F)
(A) Name and Title	(B)			() Pos	رر itior	1		Reportable	(E) Reportable	(r) Estimated
Name and Title	Average hours per	(do	not c	heck	more	than	one h an	compensation	compensation	amount of
	week					or/trus		from	from related	other
	(list any	ctor						the	organizations	compensation
	hours for	rdire				ted		organization	(W-2/1099-MISC)	from the
	related	stee c	ruste			ensa		(W-2/1099-MISC)		organization
	organizations	ıal tru	onalt		ployee	comi				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) BRANDON MANN	50.00	-	_=	0	<u> </u>	Ξ 6	Œ			
CHAIRMAN & CEO		x		х				98,966.	0.	10,250.
(2) LISA MANN	19.00									
COMMUNICATIONS DIRECTOR/TR		Х		Х				26,981.	0.	0.
(3) DAVID STEWARD	1.00									
BOARD MEMBER		Х						0.	0.	0.
(4) GREG SCHUSTER	1.00]						_	_	_
BOARD MEMBER/SECRETARY		Х		Х				0.	0.	0.
(5) DAVID PEACOCK	1.00	ļ								
BOARD MEMBER		Х						0.	0.	0.
		1								
						<u> </u>				
		1								
		1								
		-								
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	990 (2012) MINISTRI	ES AT W	ORI	ζ,	I	NC.	•			27-03	<u> 392</u>	335	Р	age 8
Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ighe	st C	Compensated Employe	es (continued)				
	(A) Name and title	(B) Average hours per week	box	not c	Pos check ess pe nd a d	itior more	than	h an	(D) Reportable compensation from	(E) Reportable compensation from related		am	(F) timate nount other	of
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		frorga orga	pensa om th anizat d relat anizati	e ion ed
			_											
			_											
	Sub-total								125,947.		0.	1	0,2	
	Total from continuation sheets to Part V								125,947.		0.	1	0,2	<u>0.</u>
a	Total (add lines 1b and 1c) Total number of individuals (including but n						e) wl	10 r	-	000 of reportable	_		0,2	50.
	compensation from the organization	iot iiiriited to ti	1030	iiot	ou ai	DOV	C) WI	10 1	cocived more than proc	,,ooo or reportable				C
													Yes	No
3	Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for s</i>								highest compensated e			3		Х
4	For any individual listed on line 1a, is the su and related organizations greater than \$15		le co	omp	ensa	atior	n and	d ot	her compensation from			4		Х
	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	-				-		elat	ted organization or indiv	idual for services		5		Х
	ion B. Independent Contractors Complete this table for your five highest co	mnoncated in	don	ande	ont o	ont	raata	aro t	that received more than	\$100,000 of com		otion f	rom	
	the organization. Report compensation for (A)								n the organization's tax		——	(C		
	Name and business	address	N	INC	E				(B) Description of s	services		omper		n
2	Total number of independent contractors (i \$100.000 of compensation from the organi	•	ot li	mite	d to		se li:	stec	d above) who received n	nore than				

MINISTRIES AT WORK, INC. 27-0392335 Page **9**

Pa	rt VII						
_		Check if Schedule O cont	ains a response to any que	estion in this Part VIII	(D)	(0)	
				(A) Total revenue	(B) Related or	(C) Unrelated	Revenue excluded
				101411101011410	exempt function	business	from tax under sections 512, 513, or 514
<u>က က</u>	4 -	Cadavatad assessins	las l		revenue	revenue	513, 01 514
ut t		Federated campaigns Membership dues					
ارة ق		Fundraising events					
ar A		Related organizations					
s, G		Government grants (contribut					
Sign		All other contributions, gifts, gran	· · · · · · · · · · · · · · · · · · ·				
la et	-	similar amounts not included abo		40.			
Per	g	Noncash contributions included in lines					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f	·····	209,240			
			Business	Code			
e e	2 a						
e K	b						
en S	С						
le J	d						
Program Service Revenue	е						
-		All other program service reve					
\dashv	g			. ▶			
	3	Investment income (including					
	4	other similar amounts)		· [
	4 5						
	3	Royalties	(i) Real (ii) Pers	onal .			
	6 a	Gross rents	, ,	Orial			
	b						
		Rental income or (loss)					
		Net rental income or (loss)		. ▶			
		Gross amount from sales of	(i) Securities (ii) Oth	ner			
		assets other than inventory	2,214.				
	b	Less: cost or other basis					
		and sales expenses Gain or (loss) Net gain or (loss)	2,233.				
	С	Gain or (loss)	-19.				1.0
				. ▶ -19	•		-19.
ne	8 a	Gross income from fundraising					
Ven		including \$					
Be		contributions reported on line	•				
Other Revenue	L	Part IV, line 18					
₽		Net income or (loss) from fund					
		Gross income from gaming ac					
		Part IV, line 19	I				
	b	Less: direct expenses					
		Net income or (loss) from gam		. ▶			
		Gross sales of inventory, less					
		and allowances	a				
	b	Less: cost of goods sold					
	С	Net income or (loss) from sale	s of inventory	. ▶			
ļ		Miscellaneous Revenu	e Business	Code			
	11 a						
	b						
	C						
		All other revenue					
		Total. Add lines 11a-11d Total revenue . See instructions.			. 0.	0.	-19.
23200 12-10-	12	TOTAL TOVOLING. OGG HISH HOHOIIS.		200,221	. 0•	0.	Form 990 (2012)

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 to any question in this Part IX (B) (D) Do not include amounts reported on lines 6b. Total expenses Program service Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments. organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 149,402. 122,158. 13,622. trustees, and key employees 13,622. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 41,066. 39,083. 1,106. 877. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 13,664. 11,609. 1,036. 1,019. Payroll taxes 10 Fees for services (non-employees): Management 2.639. 2.111. 396. 132. 2,297. 2,297. Accounting Professional fundraising services. See Part IV. line 17 Investment management fees _____ Other. (If line 11g amount exceeds 10% of line 25, 1,380. 1,104. 207. 69. column (A) amount, list line 11g expenses on Sch O.) 803. 763. 40. Advertising and promotion 12 650. 609. 22. <u> 19.</u> 13 Office expenses 2,707. 2,852. 129. 16. Information technology 14 Royalties 15 16 Occupancy 10,163. 142. 9,661. 360. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 954. 1,026. 41. 31. 22 Depreciation, depletion, and amortization 3,960. 1,980. 1,980. 23 Other expenses. Itemize expenses not covered 24 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.) 4,807. 4,807. TEACHING AIDS TELEPHONE & COMMUNICATI 3,512. 3,200. 136. 176. 54. SERVICE FEES 1,086. 869. 163. 45. TRAINING EXPENSE 903. 858. 877. 875. 1. All other expenses 241,087. 203,348. 21,165. 16,574. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. if following SOP 98-2 (ASC 958-720)

Form 990 (2012)

Part X | Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response to any	y questi	on in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			50,334.	1	14,247.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			32,125.	3	33,750
	4	Accounts receivable, net			-	4	
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compens.		· · ·			
		Part II of Schedule L			5		
	6	Loans and other receivables from other disqual				Ť	
		section 4958(f)(1)), persons described in section	•	,			
		employers and sponsoring organizations of sec					
		employees' beneficiary organizations (see instr)		·		6	
ţ	,					7	
Assets	7	Notes and loans receivable, net				8	
⋖	8	Inventories for sale or use				9	
	9					9	
	10a	Land, buildings, and equipment: cost or other	,,	6 420			
	١.	basis. Complete Part VI of Schedule D		6,429.	2,392.		1 166
		Less: accumulated depreciation	10b		4,394.		4,166
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14	620		
	15	Other assets. See Part IV, line 11		0.	15	630.	
	16	Total assets. Add lines 1 through 15 (must equ			84,851.		52,793
	17	Accounts payable and accrued expenses	1,215.	17	1,023.		
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
≣	22	Loans and other payables to current and forme	r officers	s, directors, trustees,			
Liabilities		key employees, highest compensated employee	es, and	disqualified persons.			
_		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate	d third p	parties		24	
	25	Other liabilities (including federal income tax, pa	yables t	o related third			
		parties, and other liabilities not included on lines	s 17-24)	Complete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			1,215.	26	1,023.
		Organizations that follow SFAS 117 (ASC 958	3), chec	k here X and			
es		complete lines 27 through 29, and lines 33 ar					
Š	27	Unrestricted net assets			51,511.	27	18,020.
3ala	28	Temporarily restricted net assets			32,125.	28	33,750.
Net Assets or Fund Balances	29			<u></u> .		29	
Ē		Organizations that do not follow SFAS 117 (A					
ō		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
.SS(31	Paid-in or capital surplus, or land, building, or ed				31	
ž A	32	Retained earnings, endowment, accumulated in				32	
ž	33	Total net assets or fund balances			83,636.	33	51,770.
	34	Total liabilities and net assets/fund balances			84,851.	34	52,793.

Pa	rt XI Reconciliation of Net Assets			•	
	Check if Schedule O contains a response to any question in this Part XI				
		_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		9,2	
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,0	
3	Revenue less expenses. Subtract line 2 from line 1	3		1,8	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8	3,6	36.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	5	1,7	70.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				Ш
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	-			
	Act and OMB Circular A-133?		3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

MINISTRIES AT WORK, INC.

Employer identification number 27 – 0392335

			·· · ·									
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this part	:.) See inst	ructions.				
The orgar	nization is not a	a private foundation	because it is: (For lines 1	1 through ⁻	11, check	only one b	ox.)					
1 🖳	A church, cor	nvention of churches	s, or association of churc	ches desc	ribed in se	ction 170	(b)(1)(A)(i)					
2	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E.)								
з 🗌			tal service organization of			170(b)(1)	(A)(iii).					
4	•		operated in conjunction					(b)(1)(A)(ii	i). Enter	the hospita	l's nam	ne.
• —	city, and stat		,						•			,
5	•		benefit of a college or ur	niversity ov	wned or or	nerated by	a governi	mental uni	t describ	ned in		
5	-	(b)(1)(A)(iv). (Comple	-	iivoroity o	whod or of	ociated by	a governi	nontal am	t decorns	JOG 111		
•			•			470(1)(4						
6 L 7 X			ent or governmental unit									
7 <u>X</u>			eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public desc	ribed	ın
		b)(1)(A)(vi). (Comple										
8 📙			ection 170(b)(1)(A)(vi).									
9 📖	An organizati	ion that normally rec	eives: (1) more than 33 1	1/3% of its	support f	rom contri	butions, m	nembershi	p fees, a	ınd gross re	ceipts	from
	activities rela	ted to its exempt fur	nctions - subject to certa	in excepti	ons, and (2) no more	than 33 1	1/3% of its	support	t from gross	invest	ment
	income and u	unrelated business ta	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization	after June 3	30, 197	⁷ 5.
	See section	509(a)(2). (Complete	Part III.)									
10	An organizati	ion organized and or	perated exclusively to te	st for publ	ic safety. S	See sectio	n 509(a)(4	1).				
11 🔲			perated exclusively for th						v out the	e purposes o	of one	or
	J		ations described in section		′ '		· · · · · · · · ·		,			
		• • •	organization and comple		-		.,. 555 551	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-,,(-,: -::			
	a Type I			ype III - Fu	-		,	тур	e III - No	n-functional	ılv inte	arated
e 🗀	,,	•	t the organization is not		-	-					•	_
e												uı
		· ·	han one or more publicly		U				9(a)(1) or	section 508	1(a)(2).	
f			ten determination from t	ine IRS tha	atitis a Ty	pe i, Type	II, or Type	e III				
	•	rganization, check th										
g	Since August	t 17, 2006, has the c	organization accepted ar	ny gift or co	ontributior	n from any	of the foll	owing pers	sons?			
	(i) A person	n who directly or ind	irectly controls, either al-	one or tog	ether with	persons of	lescribed	in (ii) and (iii) below	/,	Yes	No
	the gove	erning body of the su	upported organization?							11g(i)		
	(ii) A family	member of a persor	n described in (i) above?							11g(ii)		
	(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above	e?					11g(iii)		
h			about the supported or									
		3	,		()							
` '	of supported anization	(ii) EIN	(described on lines 1-9 above or IRC section	(iv) Is the o in col. (i) lis governing	sted in your	organizat	ion in col.	(vi) Is organizatio (i) organiz U.S	ed in the	(vii) Amoun sup	t of mo	netary
			(see instructions))	Yes	No	Yes	No	Yes	No	1		
Total												

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

Schedule A (Form 990 or 990-EZ) 2012

232021 12-04-1

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

(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.)

Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total of citis, grants, contributions, and membership frees received. ((b) not include any "unusual grants.") 286,590. 196,770. 209,240. 692,600.	Sec	ction A. Public Support						
membership fees received. (Do not include any "unusual grants.") 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 3 286,590. 196,770. 209,240. 692,600. 5 The portion of total contributions by each person (other than a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 286,590. 196,770. 209,240. 692,600. 6 Public support, subsystities 8 now live 4 286,590. 196,770. 209,240. 692,600. 6 Public support, subsystities 8 now live 4 286,590. 196,770. 209,240. 692,600. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Not income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 18. 18. 18. 18. 18. 18. 18. 18.	Cale	ndar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
include any "unusual grants.") 2 Tax revenues levied for the organization is 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 5 The potion of total contributions by each person (ofther than a governmental unit to publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Alerest the significant included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support discover the significant included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support alerest beginning in) P (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) 770. 209 , 240 . 692 , 600 . 7 Amounts from line 4 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 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 2 Gross receipts from related activities, etc. (see instructions) 12 Gross receipts from related activities, etc. (see instructions) 15 First five years. If the Form 990 is for the organization is first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. The organization of constant of the organization of the organization of and the hex box on line 13, and line 14 is 33 1/3% or more, check this box and and stop here. The organization qualifies as a publicly supported organization meets the "facts and circumstances test. 2012. If the organization did not check a box on line 13, and line 13, 18, 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 organ	1	Gifts, grants, contributions, and						
2 Tax revenues level of 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 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 256 of the amount shown on line 11, column (f) 479,068. 6 Public support. Subrazit lines 9 from line 4 Section B. Total Support Calendar year (or fiscal year beignining in) ► (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Calendar year (or fiscal year beignining in) ► (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Calendar year (or fiscal year beignining in) ► (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Calendar year (or fiscal year beignining in) ► (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Calendar year (or fiscal year beignining in) ► (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Calendar year (or fiscal year beignining in) ► (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Calendar year (or fiscal year beignining in) ► (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Calendar year (or fiscal year beignining in) ► (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Calendar year (or fiscal year beignining in) ► (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Calendar year (or fiscal year beignining in) ► (a) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Calendar year (or fiscal year beignining in) ► (a) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Colondar year (or fiscal year beignining in) ► (a) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Colondar year (or fiscal year beignining in) ► (a) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Colondar year (or fiscal year beignining in) ► (a) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Colondar year (or fiscal year beignining in) ► (a) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Colondar year (or fiscal year beignining in) ► (a) 2009 (c) 2010 (d) 2011 (e) 2012		membership fees received. (Do not						
tration'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 5 The portion of total contributions by apported organization included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support, Subrost less 5 ten line 4. 8 Gross income from initiar sources, dividends, payments received on securities loans, rents, royalties and income from initiar sources, 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 10 Other income. Do not include gain or loss from the sale of capital assests (Explain in Part IV). 11 Total support. Add lines 7 through 10 5 Public support percentage from 2012 (line 6, column (f) divided by line 11, column (f). 1 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. 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)). 15 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)). 16 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 14 is 33 1/3% or more, check this box and stop here. The organization did not check be box on line 13, and line 15 is 33 1/3% or more, check this box and stop here. Explain in Part IV) how the organization mets the "facts and circumstances' test, check this box and stop here. Explain in Part IV how the organization mets the "facts and circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization mets the "facts and circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more		include any "unusual grants.")			286,590.	196,770.	209,240.	692,600.
or expended on its behalf 3 The value of services or facilities turnished by a governmental unit to the organization without charge 4 Total, Add lines of through 3 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, Salvianat limits from line 4 8 Gross income from interest, dividendis, payments received on securities loans, rents, royalties and income from interest, dividendis, payments received on securities loans, rents, royalties and income from interest, dividendis, payments received on 59 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV). 11 Total support, Add lines / through 10 2 Gross receipts from related activities, etc. (see instructions) 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501c(x)3 organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 8, column (f) divided by line 11, column (f))	2	Tax revenues levied for the organ-						
The value of services or facilities furnished by a governmental unit to the organization without charge of the programmental unit to the organization without charge of the programmental unit to the organization of total contributions by each person (other than a governmental unit to publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 479,068. 6 Public support. Subreat line 5 from line 4 213,532. 8ection B. Total Support Calledar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Support organization from line 4 286,590. 196,770. 209,240. 692,600. 8 Gross income from line 4 286,590. 196,770. 209,240. 692,600. 9 Net income from unrelated business activities, whether or not the business is regularly carried on Orther income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 17 Total support. Add line 7 through 10 18 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. Programization of United P		ization's benefit and either paid to						
turnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 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 8 Gross income from interest, dividende, payments received on securities leans, rents, royalties and income from similar sources. 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assest (Explain In Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 Gross receipts from related activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assest (Explain In Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 Gross receipts from related activities and income from 2011 Schedule A, Part II, line 14 15 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		or expended on its behalf						
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Public support percentage from 2011 Schedule A, Part II, line 14 16a 33 1/3% support test - 2012. 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 b 33 1/3% support test - 2011. 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 17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization 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	Sec	ction C. Computation of Publi	c Support Pe	rcentage				
16a 33 1/3% support test - 2012. 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 b 33 1/3% support test - 2011. 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 17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization 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								%
stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2011. 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 17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the	15	Public support percentage from 2011	Schedule A, Part	II, line 14			15	%
b 33 1/3% support test - 2011. 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 17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the	16a	• •	•		,		,	
and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the		stop here. The organization qualifies a	as a publicly supp	orted organization	n			▶□
17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	b		•		•		•	
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 b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the		and stop here. The organization qualit	fies as a publicly	supported organi	zation			▶□
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	17a		-	•				•
b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the		and if the organization meets the "fact	ts-and-circumstar	ices" test, check	this box and stop h	iere. Explain in Pa	t IV how the organ	nization
more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the		meets the "facts-and-circumstances" t	test. The organiza	ation qualifies as a	a publicly supported	d organization		▶□
	b	10% -facts-and-circumstances test	- 2011. If the org	anization did not	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
expeniention mosts the "facts and sixumateness" test. The expenientian smallfline as a multiple small fact.		more, and if the organization meets th	e "facts-and-circu	ımstances" test, (check this box and	stop here. Explair	in Part IV how the	·
organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
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	18	Private foundation. If the organization	n did not check a	box on line 13, 1	6a, 16b, 17a, or 17b	o, check this box a	ınd see instruction	s ▶∟

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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
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.)						
14 First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	zation,
·	ū			•		· . 🗀
Section C. Computation of Publi	c Support Pe	rcentage				
15 Public support percentage for 2012 (li	ne 8, column (f) d	ivided by line 13, o	column (f))		15	%
16 Public support percentage from 2011	16	%				
Section D. Computation of Inves	tment Incom	e Percentage				
17 Investment income percentage for 20	12 (line 10c, colur	mn (f) divided by lir	ne 13, column (f))		17	%
18 Investment income percentage from 2	.011 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2012. If the	organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line	I7 is not
more than 33 1/3%, check this box ar						
b 33 1/3% support tests - 2011. If the	-					
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	his box and see in	structions	<u></u>

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

Department of the Treasury Internal Revenue Service

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

Schedule of Contributors

OMB No. 1545-0047

Name of the organization

Employer identification number

27-0392335 MINISTRIES AT WORK, INC. Organization type (check one): Filers of Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 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, total 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 total 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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

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 on line H of its Form 990-EZ or on Part I, 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).

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

➤ Attach to Form 990. ➤ See separate instructions.

2012
Open to Public Inspection

Name of the organization

MINISTRIES AT WORK, INC

Employer identification number

Pai	t I Organizations Maintaining Donor Advised F		s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.		•
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		_
4	Aggregate value at end of year		_
5	Did the organization inform all donors and donor advisors in writing	ng that the assets held in donor advis	sed funds
•	are the organization's property, subject to the organization's exc	_	
6	Did the organization inform all grantees, donors, and donor advis		
_	for charitable purposes and not for the benefit of the donor or do		
	impermissible private benefit?		
Pai			
1	Purpose(s) of conservation easements held by the organization (
	Preservation of land for public use (e.g., recreation or educ		storically important land area
	Protection of natural habitat		ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	-		•
С	Number of conservation easements on a certified historic structu	2c	
d	Number of conservation easements included in (c) acquired after	8/17/06, and not on a historic struct	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	ed, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation easem	ent is located >	
5	Does the organization have a written policy regarding the periodi	c monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it hold		
6	Staff and volunteer hours devoted to monitoring, inspecting, and		
7	Amount of expenses incurred in monitoring, inspecting, and enfo		
8	Does each conservation easement reported on line 2(d) above sa	atisfy the requirements of section 170	
9	In Part XIII, describe how the organization reports conservation e	·	
	include, if applicable, the text of the footnote to the organization'	s financial statements that describes	the organization's accounting for
Do	conservation easements. t III Organizations Maintaining Collections of A	rt Historical Tracquires or O	thar Similar Assats
rai	Complete if the organization answered "Yes" to Form 990	•	ther Similar Assets.
10	If the organization elected, as permitted under SFAS 116 (ASC 9		ment and balance about works of ort
Ia	historical treasures, or other similar assets held for public exhibiti	-	
	the text of the footnote to its financial statements that describes		ince of public service, provide, in Fart Alli,
h	If the organization elected, as permitted under SFAS 116 (ASC 9		t and balance shoot works of art, historical
b	treasures, or other similar assets held for public exhibition, education		
	relating to these items:	ation, or research in furtherance of pu	blic service, provide the following amounts
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
2	If the organization received or held works of art, historical treasur		
-	the following amounts required to be reported under SFAS 116 (a gan, provide
а	Revenues included in Form 990, Part VIII, line 1		> \$
-	,		······································

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

Schedule D (Form 990) 2012

		LES AI WOR			20011800	or Oth			5 433.		age ∠
3	Using the organization's acquisition, access	ion, and other record	ds, chec	k any of the	following tha	it are a s	ignificant u	ise of its	collection	n item	S
	(check all that apply):		. \square								
а	Public exhibition	C			hange progra	ams					
b	Scholarly research	e	• 📖	Other							
С	Preservation for future generations										
4	Provide a description of the organization's c							se in Par	t XIII.		
5	During the year, did the organization solicit of								7		1
D	to be sold to raise funds rather than to be m								Yes		No
Pai	t IV Escrow and Custodial Arran		ete if the	e organizatio	n answered	"Yes" to	Form 990,	Part IV, I	line 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod								٦		1
	on Form 990, Part X?							L	⊻ Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing '	table:							
									Amount	!	
	Beginning balance										
	Additions during the year										
е	Distributions during the year										
f	Ending balance								1		
	Did the organization include an amount on F								∐ Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Pai	T V Endowment Funds. Complete								_		
		(a) Current year	(b) F	Prior year	(c) Two year	rs back	(d) Three ye	ears back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	•	ce (line 1	g, column (a	i)) held as:						
	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	Temporarily restricted endowment	%									
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%.									
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	nd administe	ered for t	he organiz	ation			
	by:									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organization	s listed as required o	on Sche	dule R?					3b		
4	Describe in Part XIII the intended uses of the										
Pai	t VI Land, Buildings, and Equipn			, line 10.							
	Description of property	(a) Cost or o		(b) Cost	or other	٠,	ccumulate	d	(d) Bool	k value	Э
		basis (investr	ment)	basis	(other)	de	preciation				
1a	Land										
	Buildings										
	Leasehold improvements										
d	Equipment				6,429.		2,26	3.		4,1	66.
	Other										

Schedule D (Form 990) 2012

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

4,166.

Schedule D (Form 990) 2012 MINISTRIES	AT WORK, IN	IC.	27-	0392335	Page 3
Part VII Investments - Other Securities. Sec	e Form 990, Part X, lir	ne 12.			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of	/aluation: Cost or end-o	of-year market v	/alue
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A)					
(B)					
(C)					
(D)					
· ·					
(E)					
(F)					
(G)					
(H)					
(I)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII Investments - Program Related. Se					
(a) Description of investment type	(b) Book value	(c) Method of v	/aluation: Cost or end-c	of-year market v	/alue
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX Other Assets. See Form 990, Part X, line	15.				
	Description			(b) Book va	lue
(1)				.,	
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line			>		
Part X Other Liabilities. See Form 990, Part X,	ine 25.				
1. (a) Description of liability		(b) Book value	-		
(1) Federal income taxes			_		
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2012

(11)

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part K, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.								

Schedule D (Form 990) 2012

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2012
Open to Public Inspection

Name of the organization

MINISTRIES AT WORK, INC.

Employer identification number 27-0392335

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

RELATIONSHIP WITH CHRIST, AND EXPAND GOD'S KINGDOM THROUGH THEIR

LEADERSHIP. FAITH FOR WORK - LEADERSHIP FOR LIFE!

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

BBT GROUPS GEARED SPECIFICALLY TOWARDS EMERGENCY RESPONDERS. IN

PARTICULAR, FIRE FIGHTERS AND POLICE OFFICERS. MINISTRIES@WORK

CURRENTLY HAS 65 BBT GROUPS OPERATING THROUGHOUT THE UNITED STATES,

GREAT BRITAIN, COSTA RICA, AND SOUTH AFRICA. THESE GROUPS ARE

CURRENTLY HELPING MORE THAN 1,250 MEN AND WOMEN, AND ARE ACTIVELY

RECRUITING ADDITIONAL GROUP LEADERS TO START ADDITIONAL BBT GROUPS.

FORM 990, PART VI, SECTION A, LINE 2: THE CEO AND THE TREASURER OF THE BOARD OF DIRECTORS ARE HUSBAND AND WIFE.

FORM 990, PART VI, SECTION B, LINE 11: PRIOR TO SUBMISSION, THE IRS FORM
990 AND ALL SCHEDULES OR EXHIBITS THERETO SHALL BE REVIEWED BY THE
ORGANIZATIONS BOARD OF DIRECTORS AND THE CHIEF EXECUTIVE OFFICER. THE IRS
FORM 990 MAY BE FILED ONLY UPON PRESENTATION TO AND APPROVAL OF THE BOARD
OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION MONITORS

COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY BY REQUIRING EACH DIRECTOR,

PRINCIPAL OFFICER AND MEMBER OF COMMITTEE WITH GOVERNING BOARD DELEGATED

POWERS TO SIGN ANNUALLY A STATEMENT WHICH AFFIRMS SUCH PERSONS: A) HAS

RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY; B) HAS READ AND

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

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

15610001