# PUBLIC INSPECTION COP 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)

Department of the Treasury Internal Revenue Service

OMB No. 1545-0047

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

Open to Public Inspection

A F	or the	$\pm$ 2012 calendar year, or tax year beginning $$ JUL $1,$ $2012$ and er	nding J	<u>UN 30, 2013</u>	
B CI	heck if	C Name of organization		D Employer identifi	cation number
	Addres	LANGHAM PARTNERSHIP USA, INC., NFP			
X	Name change			23-7	417198
	Initial  return	,	oom/suite	E Telephone numbe	
	Termin ated Amenc	1.0. BOX 105			595-5117
	return	City, town, or post office, state, and ZIP code		G Gross receipts \$	2,619,030.
	tion pendin	CAVE CREEK, AL 05327		H(a) Is this a group re	
		F Name and address of principal officer:BENJAMIN K. HOMAN SAME AS C ABOVE		for affiliates?	Yes X No
	<u> </u>	empt status:	527	H(b) Are all affiliates inc	cluded? Yes No
		e: DS. LANGHAM. ORG	JZ1	H(c) Group exemptio	,
		organization: X Corporation Trust Association Other	I Year o		M State of legal domicile: IL
	_	Summary	L rour	, 101111ation: 23 , 3   1	otato or logal dominolio.
$\neg$		Briefly describe the organization's mission or most significant activities: SUPPO	RT PA	STOR AND SE	MINARY
Activities & Governance		STUDENTS.			
, r	2	Check this box 🕨 🔲 if the organization discontinued its operations or dispose	ed of more	than 25% of its net as	
ŏ	3	Number of voting members of the governing body (Part VI, line 1a)		3	20
8	4	Number of independent voting members of the governing body (Part VI, line 1b) $$		4	19
es		Total number of individuals employed in calendar year 2012 (Part V, line 2a)			12
Ĭ		Total number of volunteers (estimate if necessary)			20
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrelated business taxable income from Form 990-T, line 34			0.
	_			Prior Year	Current Year
ne		Contributions and grants (Part VIII, line 1h)		2,350,835.	2,124,521.
Revenue		Program service revenue (Part VIII, line 2g)		105,509.	89,628.
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		103,309.	
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,467,227.	
$\dashv$		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,186,965.	1,068,672.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	1,000,072.
,		Benefits paid to or for members (Part IX, column (A), line 4)  Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		851,745.	789,763.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
beu	h '	Total fundraising expenses (Part IX, column (D), line 25) 778,662	2.		
Щ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		552,908.	780,787.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,591,618.	
		Revenue less expenses. Subtract line 18 from line 12		-124,391.	
Soc		<u> </u>	Be	ginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		3,519,451.	3,199,506.
t As	21	Total liabilities (Part X, line 26)		21,200.	19,133.
		Net assets or fund balances. Subtract line 21 from line 20		3,498,251.	3,180,373.
	rt II	Signature Block			
		lties of perjury, I declare that I have examined this return, including accompanying schedules a		•	y knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of whic	h preparer	has any knowledge.	
		Signature of officer		 Date	
Sign		Signature of officer		Date	
Here	•	Type or print name and title			
			ID	ate Check	PTIN
Paid		Print/Type preparer's name Preparer's signature  KAREN OLSON	ا ا	if	
Prep		Firm's name DUGAN & LOPATKA, CPA'S PC		self-employ Firm's EIN ▶	36-2886485
Use (		Firm's address 104 E. ROOSEVELT ROAD SUITE 102		I IIIII 9 LIIV	30 2000403
550	,	WHEATON, IL 60187-5267		Phone no. 6	30-665-4440
May	the IF	RS discuss this return with the preparer shown above? (see instructions)		1	X Yes No

Pa	rt III	Statement of Program Service Accomplishments	
		Check if Schedule O contains a response to any question in this Part III	X
1		y describe the organization's mission: SEE CHURCHES IN THE MAJORITY WORLD EQUIPPED FOR MISSION AND	GROWING
		MATURITY IN CHRIST THROUGH THE MINISTRY OF PASTORS AND LEADE	
	BEI	LIEVE, TEACH AND LIVE BY THE WORD OF GOD.	
2		ne organization undertake any significant program services during the year which were not listed on rior Form 990 or 990-EZ?	Yes X No
	If "Ye	s," describe these new services on Schedule O.	
3		ne organization cease conducting, or make significant changes in how it conducts, any program services? es," describe these changes on Schedule O.	Yes X No
4	Secti	ribe the organization's program service accomplishments for each of its three largest program services, as measured by on 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expue, if any, for each program service reported.	
4a	THE FRO ANI MOR EXE	402.065	TEACHING RS FROM
4b	THE INI THE PRE ENC		LL AROUND FOR DMMITTED
4c	THE	)(Expenses \$ 378,167. including grants of \$ 377,556.) (Revenue \$) NGHAM LITERATURE PROVIDES EVANGELICAL RESOURCES IN MULTIPLE IN ROUGH GRANTS AND DISTRIBUTION, AND FOSTERS THE INDIGENOUS CRESOURCES THROUGH SPONSORED EDITING AND WRITING AND PUBLISHER VELOPMENT.	
4d	Othe	r program services (Describe in Schedule O.)	
	(Expen	ses \$ 296,559 • including grants of \$ ) (Revenue \$	)
4e		program service expenses ► 1,485,530.	Form <b>990</b> (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)?  If "Yes," complete Schedule A	1	Х	
2	If "Yes," complete Schedule A	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	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			
	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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		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		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u> </u>
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	9 1			
	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	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
J	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		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	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	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, 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,	4-		У
40	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 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
20a		20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	100 10 mile 100 again addors a dopy of ito addition intanolal otatoriorito to tillo rotatiff:	_00		

#### 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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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		X
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? 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	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		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		х
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		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
D	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		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
٥.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
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	Х	

Form **990** (2012)

### | 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   1a   9   1b   0   0   0   1c   0   0   0   0   0   0   0   0   0		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 6-bill rot applicable   10   0   0   0   0   0   0   0   0						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. 12  2b. If all least one is reported on line 2a, did the organization fall enquired federal employment tax returns?  2b. If all least one is reported on line 2a, did the organization fall required federal employment tax returns?  2b. If all least one is reported on line 2a, did the organization fall required federal employment tax returns?  2c. 2b. X  Note. If the sum of lines 1 and 42 is greater than 250, you may be required to -6th gene instructions)  3c. Did the organization have unrelated business gross income of \$1,000 or more during the year?  3c. Did the organization have unrelated business gross income of \$1,000 or more during the year?  3c. Did the organization are fided a form 950 of the rith year? If Yea, Provide an explanation in Schedule 0  3c. Did the organization in the amendment of the foreign country; level as a bank account, securities account, or other financial account?  3c. Did the organization and party to a prohibited tax shelter framaction at any time during the tax year?  3c. Did any explanation of the foreign country; level as a bank account, securities account, or other financial account?  3c. Did any explanation and party to a prohibited tax shelter framaction at any time during the tax year?  3c. Did any explanation and party to a prohibited tax shelter framaction at any time during the tax year?  3c. Did any contributions that were not tax deductible as charitable contributions?  3c. Did the organization have a manual gross receipts that are normally greater than \$100,000, and did the organization solicity and accounts are present in explanation and party to goods and services provided to the payor?  3c. Did the organization network and payor that are present any explanation and party to goods and services provided to the payor?  3c. Did the orga	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	9			
collaboration comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) withings to prize wheners?  2a Enter the number of employees reported on Form W/3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.  3 In the state on the reported on line 2a, did the organization file all required federal employment tax returns?  3 In the state one is reported on line 2a, did the organization file all required federal employment tax returns?  3 In the state one is reported on line 2a, did the organization file all required federal employment tax returns?  3 In the state one is reported on line 2a, did the organization file all required federal employment tax returns?  3 In the state one is reported on line 2a, did the organization file all required federal employment tax returns?  3 In the state of the state of the state of the state on the state of the organization state of the organization has a shell return associated any contributions that may receive the deductible as charitately contributions?  4 If 'Yes,' In line 5a or 5b, did the organization file Form 88661?  5 Organization state may receive deductible contributions under section 170(c).  5 If 'Yes,' Indicate the number of Forms 8262 fled during the year  5 If years, if the organization neceived an contribution of qualified intellectual property, did the organization state of the state of the subject of the goods or services provided?  5 If the organization received a contribution of audited intelle	b		1b	0			
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	С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportat	ole 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		
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 Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a X  b if Yes, *has it filed a Form 900-Tr for this year? If *No*, *provide an explanation in Schedule O  3b A At any time during the calandar year, did the organization have an inferset in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accountly?  4a X  b if Yes, *there the name of the foreign country \( \) \(	2a			Î			
b If a 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 ~ file (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a X  X  3b If Yes, 'has it filed a Form 990 To this year? If 'No,' provide an explanation in Schedule O  3b If Yes, 'has it filed a Form 990 To this year? If 'No,' provide an explanation in Schedule O  3b If Yes, 'has it filed a Form 990 To return year of the second year, did not not year of financial account in a foreign country (such as a bank account, securities account, or other financial account)?  4a X  4b If Yes, 'there the name of the foreign country (such as a bank account, securities account, or other financial account)?  5a Was the organization a party to a prohibited tax shelter transaction?  5b If Yes, 'the line Sa or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes, 'the line Sa or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes, 'the line Sa or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes, 'the line Sa or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes, 'the line Sa or 5b, did the organization in clude with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c If Yes, 'the did the organization in clude with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c If Yes, 'the did the organization notify the donor of the value of the goods or services provided?  5c If Yes, 'the did the organization notify the donor of the value of the goods or services provided?  5c If Yes, 'the organization selected apprential express the property of which it was required to the organization		filed for the calendar year ending with or within the year covered by this return	2a	12			
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year?  bif "Yes," has it filed a Form 990T for this year? if "No," provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts).  5a einstructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts.  5a Was the organization or party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chariable contributions?  6b If "Yes," rid the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7b Organizations that may receive deductible contributions under section 170(c).  a bif the organization sells, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  6b If "Yes," rid the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7c If "Yes," rid the organization sells, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  6c If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required?  7c If If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required?  7f If If the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required?  7f If If the organization sell, exchange in the value of the goods or services provided?  7g If the organization received a contribution of cars, boats, airplan	b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ทร?		2b	Х	
b if Yes, 'has it filed a Form 990-T for this year? If 'No.' provide an explanation in Schedule O  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a  4 financial accountly or 'Yes,' enter the name of the foreign country. ►  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles?  6b If 'Yes,' to line 5a or 5b, did the organization the form 8886-1?  6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles?  6c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles?  6c Dorganization that may receive deductible contributions under section 170(c).  a) bill the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive appyment in excess of \$75 made partly as contribution of organizations orgits were not tax deductibles?  7 Organizations that may receive appyment in excess of \$75 made partly as contribution and partly for goods and services provided to the payor?  7 The organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8882?  8 Did the organization neceive any funds, directly or indirectly, or pay premiums on a personal benefit contract?  7 The State organization organization, during the year, pay premiums, directly or indirectly, or payens and payens and payens organization from the payens organization from the payens organi		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  5a Was the organization aperunts for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts.  5a Was the organization party to a prohibited tax shelter transaction at any time during the tax year?  5a Des the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6a Des the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?  6b If "Yes," it did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that many receive deductible contributions under section 170(c).  a Did the organization receive apyment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7 The State of the organization notity the donor of the value of the goods or services provided?  7 Did the organization receive apyment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?  7 The State of the organization notity the donor of the value of the goods or services provided?  7 The State of the organization notity the donor of the value of the goods or services provided?  7 The Did the organization received a payment in excess of \$75 made partly as a contribution of information and partly for goods and services provided?  7 The Did the organization received a contribution of qualified intellectual property, did the organization file organization services and a contribution of qualified intellectual property, did the organization file organization	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		Х
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b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b			13c				37
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	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	e O			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.

1a Enter the number of voting members of the governing body at the end of the tax year  If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.  b Enter the number of voting members included in line 1a, above, who are independent  Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustees, or key employees or a management company or other person?  Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?  Did the organization become aware during the year of a significant diversion of the organization's assets?  Did the organization become aware during the year of a significant diversion of the organization's assets?  Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  The governing body?  Bid the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  The governing body?  Ba X  Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)  Yes No.  10a Did the organization have local chapters, branches, or affiliates?  Did the organization have a written committed or this Form 990 to all members of its governing body bef		Check if Schedule O contains a response to any question in this Part VI					X
the zer mainted differences in uniting this many members of the powering body, or the powering body delayated trads authority to an excutive committee or similar committee, explain in Schedule 0.  b Enter the number of voting members included in line 1s, above, who are independent  Did any officer, director, trustee, or key employee?  2	Sec	tion A. Governing Body and Management					
there are material differences in voting rolls among members of the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.  b Enter the number of voting members included in line 1a, above, who are independent  1 2						Yes	No
body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.  1 b Enter the number of votting members included in line 1a, above, who are independent  2 Did any officer, director, trustee, or key employees to a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management outpend or officers, directors, or trustees, or key employees to a management outpend or officers, directors, or trustees, or key employees to a management company or other person?  3 J X A Did the organization necessary significant changes to its governing documents since the prior Form 990 was filed?  4 X X Did the organization have members or stockholders?  5 Did the organization have members or stockholders?  6 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  8 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  9 Did the organization have members, stockholders, or other persons other than the governing body?  8 Did the organization have members, stockholders, or other persons other than the governing body?  9 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  1 The governing body?  9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization is maling addresse? If Yess _Provide the names and addresses in Schedule O  9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)  10 Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization between the policy? If Yes, 'describe in organization is exempt purposes?	1a	Enter the number of voting members of the governing body at the end of the tax year	1a	20			
b Enter the number of voting members included in line 1a, above, who are independent		If there are material differences in voting rights among members of the governing body, or if the governing					
2 Using any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?  3		body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
officer, director, fustese, or key employee?  Joil the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?  Joil the organization make any significant charges to its governing documents since the prior Form 990 was filed?  Joil the organization have members so to its governing documents since the prior Form 990 was filed?  Joil the organization have members, stockholders?  Joil the organization have members of the organization and the power to elect or appoint one or more members of the governing body?  Joil the organization have members, stockholders, or there persons who had the power to elect or appoint one or more members of the governing body?  Joil the organization that the governing body?  Joil the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  Joil the organization on the proving body?  Joil the organization is mailing address? If Yes. *provide the names and addresses in Schedule O.  Joil the organization have local chapters, branches, or affiliates?  Joil the organization have local chapters, branches, or affiliates?  Joil the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purpose?  Joil the organization have a written conflict of interest policy? If Yos, *g or line 13  Joil the organization have a written conflict of interest policy? If Yos, *g or line 13  Joil the organization have a written conflict of interest policy? If Yos, *g	b	Enter the number of voting members included in line 1a, above, who are independent	1b	19			
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3 Did the organization delegate control over management durlies customarily performed by or under the direct supervision of officers, directors, or trustees, or leve prolipyees to a management company or other person?  4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  5 Did the organization have members or stockholders?  6 Did the organization have members or stockholders?  6 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  5 Did the organization have members of the governing body?  6 Did the organization that the governing body?  8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  8 To persons other than the governing body?  8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  8 To persons other than the governing body?  8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  8 To persons other than the governing body?  8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  8 To persons other than the governing body?  9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization in smalling address? If "Yes," provide the names and addresses in Schedule O  9 Yes Note than the provided a complete section of the persons of the perso		officer, director, trustee, or key employee?			2		Х
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5 Did the organization become aware during the year of a significant diversion of the organization's assets?  5		of officers, directors, or trustees, or key employees to a management company or other person?			3		Х
Bid the organization have members or stockholders?    A	4	Did the organization make any significant changes to its governing documents since the prior Form	990 was filed?	[	4	X	
6 Did the organization have members or stockholders?  7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  8 The governing body?  8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  8 The governing body?  8 Did the organization and the standard of the governing body?  8 Did the organization for the standard of the governing body?  8 Did the organization and the standard of the governing body?  8 Did the organization and the standard of the governing body?  9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O  9 X  Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)  Yes No.  10a Did the organization have local chapters, branches, or affiliates?  10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to disclose annually interests that could give rise to conflicts?  12b Id the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  12c Id the organization have a written policy or procedure requiring the policy?  13c Id the organization have a written	5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?	Г	5		Х
Table the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?  b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  a The governing body?  b Each committee with authority to act on behalf of the governing body?  b Each committee with authority to act on behalf of the governing body?  b Each committee with authority to act on behalf of the governing body?  b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule 0  p Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule 0  p Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization have local chapters, branches, or affiliates?  b Cell the organization have local chapters, branches, or affiliates?  b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization is exempt purposes?  10a Is Has the organization have a written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization to review this Form 990.  11a X  b Describe in Schedule 0 the process, if any, used by the organization to review this Form 990.  11b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  12b X  c Did the organization have a written whistleblower policy?  13 X  14 Did the organization have a written whistleblower policy?  15 Di	6				6		Х
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15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  a The organization's CEO, Executive Director, or top management official  b Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  16b  Section 6.104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website X Another's website X Upon request Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.  State the name, physical address, and telephone number of the person who possesses the books and records of the organization: CEDARSTONE PARTNERS − 630−5758						Х	
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Own website	-		,	,,			
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20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► CEDARSTONE PARTNERS − 630−580−5758				,,a			
CEDARSTONE PARTNERS - 630-580-5758	20		and records of the org	anizati	on: 🕨	•	

## 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.

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

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

(A) Name and Title	(B) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)				than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(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-MISC)	compensation from the organization and related organizations
(1) BENJAMIN K. HOMAN	40.00	,,		37				120 040	0	10 606
PRESIDENT	1 00	Х		Х				138,040.	0.	19,606.
(2) GREG SCHARF CHAIR	1.00	x		х				0.	0.	0.
(3) LYNN COHICK	1.00	Δ		Δ				0.	0.	0.
DIRECTOR	1.00	$ \mathbf{x} $						0.	0.	0.
(4) CHIP COMBS	1.00	22						0.	0.	<u> </u>
DIRECTOR		$ \mathbf{x} $						0.	0.	0.
(5) FRED GALE	1.00							•	•	
DIRECTOR		x						0.	0.	0.
(6) CRISSY HASLAM	1.00									
DIRECTOR		x						0.	0.	0.
(7) MARK LABBERTON	1.00									
DIRECTOR		X						0.	0.	0.
(8) JOEL MANBY	1.00									
DIRECTOR		Х						0.	0.	0.
(9) JOHN RAIN	1.00									
DIRECTOR		Х						0.	0.	0.
(10) NANCY SEAY	1.00							_	_	_
DIRECTOR		Х						0.	0.	0.
(11) DAVID SPENCE	1.00								_	_
DIRECTOR	1 00	Х						0.	0.	0.
(12) MACON STOKES	1.00							•		•
DIRECTOR	1 00	Х						0.	0.	0.
(13) LARRY THOMAS	1.00	,,						0		0
DIRECTOR	1 00	Х						0.	0.	0.
(14) TOM TOLLESON	1.00	.,						0	0.	0
DIRECTOR	1.00	Х			-			0.	0.	0.
(15) KENNETH THRASHER DIRECTOR	1.00	x						0.	0.	0.
(16) SARA GROVES	1.00	^	$\dashv$					0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(17) MICHAEL CROMARTIE	1.00						$\vdash$	0.	•	0.

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Form **990** (2012)

Form 990 (2012) LANGRAM									23-1	<u>41/</u>	<u> 190</u>	Pa	age <b>c</b>
Part VII   Section A. Officers, Directors, True		ploy	/ees			ighe	st C						
(A) Name and title	(B) Average hours per week	box	not c , unle	Pos heck ss pe	more erson	than	th an	( <b>D</b> )  Reportable  compensation  from	(E) Reportable compensation from related	on	an	(F) stimate nount other	
	(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)	organizatior (W-2/1099-MI	าร	com fr org and	pensa fom the anizat d relat	e ion ed
(18) MATT ALLMAND	1.00		Sil.	#0	Ke	E Hi	요	0					
DIRECTOR (19) MICHAEL CARD	1.00	X	-		┝	$\vdash$	-	0.		0.	_		0
DIRECTOR	1.00	$ _{\mathbf{x}}$						0.		0.			0
(20) JOEL CARPENTER	1.00	+	<u> </u>			+				<u> </u>	$\vdash$		
DIRECTOR	1100	$ \mathbf{x} $						0.		0.			0
(21) JACK SWANSON	1.00	╁				$\vdash$							<del>-</del>
SECRETARY		1		Х				0.		0.			0
(22) MARK HUNT	40.00					T							
EXECUTIVE DIRECTOR		1		Х				101,500.		0.	1	0,5	46
		$\frac{1}{2}$											
1b Sub-total	-	_				┢		239,540.		0.	3	0,1	52
c Total from continuation sheets to Part V	II, Section A					•		0.		0.			0
d Total (add lines 1b and 1c)								239,540.		0.	3	0,1	52
<ul> <li>Total number of individuals (including but compensation from the organization</li> </ul>	not limited to th	nose	e liste	ed al	bov	e) w	ho r	eceived more than \$100	0,000 of reportab	le			
- Companies non the organization p												Yes	No
3 Did the organization list any <b>former</b> officer line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> :			,	,	•	,	•	highest compensated e	. ,		3		Х
4 For any individual listed on line 1a, is the s	•							•	the organization			v	
and related organizations greater than \$15	•										4	Х	
5 Did any person listed on line 1a receive or	-				-		relat	ted organization or indiv	idual for services	3	_		Х
rendered to the organization? If "Yes," con Section B. Independent Contractors	npiete Scriedui	ie J i	ior si	ucn	pers	SOH					5		
1 Complete this table for your five highest co										npens	ation f	rom	
the organization. Report compensation for	tne calendar y	/ear	enai	ng v	vitn	or w	/itnir		year.			<b>`</b>	
(A) Name and business	N	ONI	E				( <b>B)</b> Description of s	services	С	Ompe	nsatio	n	
2 Total number of independent contractors (\$100,000 of companies from the organ		not li	mite	d to	tho	se li	stec	d above) who received n	nore than				
\$100,000 of compensation from the organ	ızatıoli 🚩										Form	990 c	2012

_			Check if Schedule O cont	tains a respon	se to any question	in this Part VIII	<u></u>	<u></u>	
				·	, .	(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1	а	Federated campaigns	1a					
اة <u>م</u>			Membership dues						
An An		С	Fundraising events	1c					
팔희		d	Related organizations	1d					
ns,			Government grants (contribut	. —					
흕별		f	All other contributions, gifts, gran						
년 된			similar amounts not included abo	ve 1f 2	2,124,521	<u>.</u>			
ᅙ		g	Noncash contributions included in lines	s 1a-1f: \$	51,103				
<u>ā č</u>		h	Total. Add lines 1a-1f		<u> </u>	2,124,521.			
					Business Code				
<u>ö</u>	2	а							
e S		b							
en l		С							
Re		d			_				
Program Service Revenue		е			-				
٦			All other program service reve						
-+		g	Total. Add lines 2a-2f						
	3		Investment income (including		•	54,949.			54,949.
			other similar amounts)			34,343.			34,343.
	4		Income from investment of ta	· ·	· ·				
	5		Royalties	(i) Real					
	6	_	Grace rente		(ii) Personal				
			Gross rents Less: rental expenses			-			
			Rental income or (loss)			_			
			Net rental income or (loss)	•	<b></b>				
			Gross amount from sales of	(i) Securitie					
	•	ч	assets other than inventory	438,006	5 .				
		b	Less: cost or other basis						
		-	and sales expenses	403,327	7.				
		С	and sales expenses  Gain or (loss)	34,679	9.				
		d	Net gain or (loss)		<b>&gt;</b>	34,679.			34,679.
اه			Gross income from fundraisin		Í				
ğ			including \$	of					
ě			contributions reported on line						
Other Revenu			Part IV, line 18		а				
₹		b	Less: direct expenses		b				
٦		С	Net income or (loss) from fund	draising event	s <b>&gt;</b>				
	9	а	Gross income from gaming ad	ctivities. See					
			Part IV, line 19		a				
			Less: direct expenses		b				
			Net income or (loss) from gan		<u></u>				
1	10	а	Gross sales of inventory, less						
			and allowances		а				
			Less: cost of goods sold		b				
-		С	Net income or (loss) from sale						
-			Miscellaneous Revenu	ie	Business Code				1 554
1	11		OTHER REVENUE		900099	1,554.			1,554.
		b			_				
		C	All alle and		-				
			All other revenue			1,554.			
١.	12	е	<b>Total.</b> Add lines 11a-11d <b>Total revenue.</b> See instructions.		_	2,215,703.	0.	0.	91,182.
232009 12-10-1			Total Totoliao. Odo monuciono.		<u> </u>		<u> </u>	- 0 (	Form <b>990</b> (2012)

# Part IX Statement of Functional Expenses

	on 501(c)(3) and 501(c)(4) organizations must com		ner organizations must co	mplete column (A).	
	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	219,401.	219,401.		
3	Grants and other assistance to governments,	- ,	,		
	organizations, and individuals outside the United States. See Part IV, lines 15 and 16	849,271.	849,271.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	268,198.	108,968.	42,676.	116,554.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	420,345.	172,138.	62,910.	185,297.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	F2 074	10 761	17 000	17 201
9	Other employee benefits	53,074. 48,146.	18,761. 19,639.	17,022. 7,088.	17,291. 21,419.
10 11	Payroll taxes  Fees for services (non-employees):	40,140.	19,039.	7,000.	21,419.
	Management				
	Legal	7,364.		6,350.	1,014.
	Accounting	51,791.	3,999.	47,792.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	14 004		14 004	
f	Investment management fees	14,884.		14,884.	
g	column (A) amount, list line 11g expenses on Sch O.)	97,752.	7,200.	61,799.	28,753. 121,373.
12	Advertising and promotion	121,373.	7 440	20 200	
13	Office expenses	114,193. 69,018.	7,442. 10,731.	30,328.	76,423. 56,974.
14	Information technology	09,010.	10,731.	1,313.	30,374.
15 16	Royalties Occupancy	2,866.			2,866.
17	Travel	183,567.	54,182.	28,362.	101,023.
18	Payments of travel or entertainment expenses		-		-
40	for any federal, state, or local public officials	81,212.	28,376.	3,261.	49,575.
19 20	Conferences, conventions, and meetings Interest	01,212.	20,370.	3,201.	43,373.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	18,750.		18,750.	
23	Insurance Other expenses Itamiza expenses not expend	11,882.		11,882.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	OTHER EXPENSES	5,524.	-15,189.	20,613.	100.
b	PROGRAM EXPENSES	611.	611.		
С					
d					
	All other expenses   Total functional expenses. Add lines 1 through 24e	2,639,222.	1,485,530.	375,030.	778,662.
<u>25</u> 26	Joint costs. Complete this line only if the organization	2,000,222.	1,400,000	373,030•	770,002.
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				5 000 (22.42)
	II following doi: 30 2 (Add 350 720)				

Form 990 (2012)
Part X | Balance Sheet

Par	t X	Balance Sheet		<u></u>			
		Check if Schedule O contains a response to any	quest	ion in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			512,766.	1	609,355
	2	Savings and temporary cash investments			143,123.	2	49,363
	3	Pledges and grants receivable, net		409,009.	3	205,272	
	4	Accounts receivable, net		4	11,771		
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensations					
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	4958(	c)(3)(B), and contributing			
		employers and sponsoring organizations of sec-	tion 50	1(c)(9) voluntary			
		employees' beneficiary organizations (see instr).	Comp	lete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		Г		7	
Ass	8	Inventories for sale or use				8	
`	9	B			56,350.	9	3,730
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	750,000.			
	b		10b	243,750.	525,000.	10c	506,250
	11	Investments - publicly traded securities			1,785,703.	11	1,726,265
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	87,500.	15	87,500		
	16	Total assets. Add lines 1 through 15 (must equ			3,519,451.	16	3,199,506
	17	Accounts payable and accrued expenses			21,200.	17	19,133
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
န္မ	21	Escrow or custodial account liability. Complete				21	
≝	22	Loans and other payables to current and former	officer	s, directors, trustees,			
Liabilities		key employees, highest compensated employee	es, and	disqualified persons.			
<u> </u>		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ated thi	rd parties		23	
	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities (including federal income tax, pa	yables	to related third			
		parties, and other liabilities not included on lines	17-24	. Complete Part X of			
		Schedule D				25	
	26				21,200.	26	19,133
		Organizations that follow SFAS 117 (ASC 958	), chec	k here X and			
es		complete lines 27 through 29, and lines 33 ar	d 34.				
2	27	Unrestricted net assets			3,046,689.	27	2,857,078 323,295
33	28	Temporarily restricted net assets			451,562.	28	323,295
ᅙᅵ	29			<u></u> <b>_</b>		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (A					
6		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or ed	quipme	nt fund		31	
et	32	Retained earnings, endowment, accumulated in	come,	or other funds		32	
z	33	Total net assets or fund balances			3,498,251.	33	3,180,373
	34	Total liabilities and net assets/fund balances			3,519,451.	34	3,199,506

Form **990** (2012)

Pa	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	2,21		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,63		
3	Revenue less expenses. Subtract line 2 from line 1	3	-42		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,49		
5	Net unrealized gains (losses) on investments	5	10	<u>5,6</u>	41.
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	3,18	0,3	73.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				X
				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	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	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				
	consolidated basis, or both:				
	X 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	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		Х
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		

Form **990** (2012)

#### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

**Employer identification number** LANGHAM PARTNERSHIP USA, INC., NFP 23-7417198

Part I	Reason	for Public Char	<b>ity Status</b> (All organiz	ations mu	st complet	e this part	:.) See inst	tructions.					
he organ	ization 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 <b>se</b>	ction 170	(b)(1)(A)(i)	).					
2			'0(b)(1)(A)(ii). (Attach Sc										
з 🗌			tal service organization of	•		170(b)(1)	A)(iii).						
4			operated in conjunction					(b)(1)(A)(ii	ii). Enter	the hos	spital'	s nam	ne.
	city, and state								•		•		,
5	•		benefit of a college or ur	niversity o	wned or or	perated by	a governi	mental uni	it describ	ed in			
	_	(b)(1)(A)(iv). (Comple	-			, , , , ,	a go						
6			ent or governmental unit	t describe	d in <b>sectio</b>	n 170/h)/1	IVAV <sub>V</sub> )						
7 X			eives a substantial part					or from the	aonoral	nublic	doco	ribod i	in
,	_	<b>b)(1)(A)(vi).</b> (Comple	•	or its supp	ort nom a	governine	intai uniit C		general	public	uesci	ibed i	""
8			ection 170(b)(1)(A)(vi). (	(Complete	Port II \								
9 🗔						rom contri	hutione m	namharchi	in fees a	nd aros	ee roc	ainte	from
<b>9</b>													
	income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975.												
10	See section 509(a)(2). (Complete Part III.)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).												
11													
	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or												
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See <b>section 509(a)(3).</b> Check the box that describes the type of supporting organization and complete lines 11e through 11h.												
	a Type I				nctionally i		c	Tvn	e III - No	n-functi	ionall	v inter	aratad
		•	at the organization is not		•	ū						•	-
С			han one or more publicly										
f		-	ten determination from t		-				5(4)(1) 51	0000101	1000	(u)(L).	
•		rganization, check th											
a		,	nis box organization accepted ar						?				. —
g			irectly controls, either al							,	ı	Yes	No
			upported organization?								1g(i)	100	
	-		n described in (i) above?								g(ii)		
			person described in (i) of								g(iii)		
h			about the supported org								9(/		
	T TOVIGO LITO IX	ollowing information	about the supported of	garnzation	(3).								
(i) Nama	of supported	/ii\ EINI	(iii) Type of organization	(iv) Is the o	organization	(v) Did voi	ı notify the	(vi) Is	the	(vii) An	nount	of mor	notany
` '	anization	(ii) EIN	(described on lines 1-9		sted in your	organizat		organizátio	on in col.	(VII) AII	supp		iiciai y
0.90				governing	document?	(i) of your	support?	(i) organiz U.S	.?		00.51	, , , ,	
			(see instructions))	Yes	No	Yes	No	Yes	No				
otal													

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

Schedule A (Form 990 or 990-EZ) 2012

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2,336,822.	1,761,283.	2,306,829.	2,350,835.	2,124,521.	10,880,290.
2	Tax revenues levied for the organ-						
	ization'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	2,336,822.	1,761,283.	2,306,829.	2,350,835.	2,124,521.	10,880,290.
	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)						2,212,717.
6	Public support. Subtract line 5 from line 4.						8,667,573.
	ction B. Total Support						. , , , , , , , , , , , , , , , , , , ,
	endar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	2,336,822.	1,761,283.	2,306,829.	2,350,835.	2,124,521.	10,880,290.
	Gross income from interest,	_,,	_,,,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_,,	_,,	_,,	
o	dividends, payments received on						
	-						
	securities loans, rents, royalties	68,066.	59,668.	53,028.	46,381.	54,949.	282,092.
۵	and income from similar sources  Net income from unrelated business	00,000	33,0001	3370201	10,3010	31/3131	202,0320
Э							
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	355.	9,781.	98,105.	10,883.	1 55/	120,678.
	assets (Explain in Part IV.)	333.	9,701.	90,103.	10,005.	1,334.	11,283,060.
	Total support. Add lines 7 through 10		,				11,203,000.
12	•	•	,			12	
13	First five years. If the Form 990 is for	-	s first, second, third	d, fourth, or fifth ta	ix year as a sectio	n 501(c)(3)	<b>.</b> —
Sec	organization, check this box and stop ction C. Computation of Publ	ic Support Pe	rcentage				<b>P</b>
				al (f))		14	76.82 %
	Public support percentage for 2012 (I		•	* * * * * * * * * * * * * * * * * * * *		15	00 45
	Public support percentage from 2011						
102	33 1/3% support test - 2012. If the contains the contains the contains the contains the contains and in the contains the contains and in the contains the contain						
	stop here. The organization qualifies						
	33 1/3% support test - 2011. If the c						
47.	and <b>stop here.</b> The organization qual						
1/8	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"	-		*			
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the						
	organization meets the "facts-and-circ						
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	ınd see instruction	s ▶└──

Schedule A (Form 990 or 990-EZ) 2012

#### 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	iow, piedoc com	oloto i art II.,				
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
<b>1</b> Gifts, grants, contributions, and		, ,	, ,	` '		.,
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
· · · · ·						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons <b>b</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						
		#10000	( ) 0040	( 1) 0044	( ) 0040	(O.T.)
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
<b>b</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.)						
<b>13</b> Total support. (Add lines 9, 10c, 11, and 12.)						
<b>14</b> First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth to	ax year as a sectio	on 501(c)(3) organiz	ation,
check this box and stop here						<u></u>
Section C. Computation of Public					1 1	
15 Public support percentage for 2012 (lin					15	<u>%</u>
16 Public support percentage from 2011					16	%
Section D. Computation of Inves					l l	
17 Investment income percentage for 201					17	%
18 Investment income percentage from 2					18	%
<b>19a 33 1/3% support tests - 2012.</b> If the o	•		•		*	
more than 33 1/3%, check this box an						
<b>b 33 1/3</b> % <b>support tests - 2011.</b> If the o	•			•	•	
line 18 is not more than 33 1/3%, chec			•		ŭ	
20 Private foundation. If the organization	ı did not check a	box on line 14, 19	a, or 19b, check th	his box and see in	structions	<b>&gt;</b> L

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Financial Statements**

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

➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047

2012
Open to Public Inspection

Name of the organization

LANGHAM PARTNERSHIP USA, INC., NFP

Employer identification number 23-7417198

Par	tΙ	Organizations Maintaining Donor Advised	I Funds or Other Similar Fund	s or A	Accounts. Complete if the
		organization answered "Yes" to Form 990, Part IV, line	6.		
			(a) Donor advised funds	(	<b>b)</b> Funds and other accounts
1	Total	number at end of year			
2		gate contributions to (during year)			
3		gate grants from (during year)			
4		gate value at end of year			
5		e organization inform all donors and donor advisors in w	riting that the assets held in donor adv	sed fun	nds
	are th	e organization's property, subject to the organization's e	xclusive legal control?		Yes No
6		e organization inform all grantees, donors, and donor ad			
		aritable purposes and not for the benefit of the donor or			
	imper	missible private benefit?			Yes No
Par	t II	Conservation Easements. Complete if the orga	nization answered "Yes" to Form 990,	Part IV,	line 7.
1	Purpo	se(s) of conservation easements held by the organization	n (check all that apply).		
		Preservation of land for public use (e.g., recreation or ed	lucation) Preservation of an h	storical	ly important land area
		Protection of natural habitat	Preservation of a cer	tified hi	istoric structure
		Preservation of open space			
2	Comp	lete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form	of a co	onservation easement on the last
	day o	f the tax year.			
					Held at the End of the Tax Year
а	Total	number of conservation easements			2a
b	Total	acreage restricted by conservation easements			2b
С	Numb	er of conservation easements on a certified historic struc	cture included in (a)		2c
d	Numb	er of conservation easements included in (c) acquired af	ter 8/17/06, and not on a historic struc	ture	
	listed	in the National Register			2d
3	Numb	er of conservation easements modified, transferred, rele	ased, extinguished, or terminated by the	ne orgar	nization during the tax
	year 🕽	<b>-</b>			
4	Numb	er of states where property subject to conservation ease	ement is located		
5		the organization have a written policy regarding the perio			
		ons, and enforcement of the conservation easements it h			
6		and volunteer hours devoted to monitoring, inspecting, a			
7		nt of expenses incurred in monitoring, inspecting, and er			
8		each conservation easement reported on line 2(d) above			
		ection 170(h)(4)(B)(ii)?			
9		t XIII, describe how the organization reports conservation	•		•
		e, if applicable, the text of the footnote to the organization	on's financial statements that describes	s the or	ganization's accounting for
Da		rvation easements.	Aut Historical Transcript	Alban .	Cimilar Assats
Par	t III	Organizations Maintaining Collections of		otner	Similar Assets.
		Complete if the organization answered "Yes" to Form 9			
1a		organization elected, as permitted under SFAS 116 (ASC	•		•
		ical treasures, or other similar assets held for public exhil		ance of	public service, provide, in Part XIII,
		xt of the footnote to its financial statements that describe			
b		organization elected, as permitted under SFAS 116 (ASC			
		res, or other similar assets held for public exhibition, edu	ucation, or research in furtherance of p	ublic se	rvice, provide the following amounts
		g to these items:			•
		evenues included in Form 990, Part VIII, line 1			
_			All and the state of the state		
2		organization received or held works of art, historical treas		aı gaın,	provide
_		llowing amounts required to be reported under SFAS 110	· ·		•
		nues included in Form 990, Part VIII, line 1			
D	Asset	s included in Form 990, Part X			. • •

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Schedule D (Form 990) 2012

		PARTNERSH							B Page 2
Pai	t III   Organizations Maintaining C	collections of A	rt, Hist	orical T	reasures, c	or Other	Similar Ass	ets(contin	ued)
3	Using the organization's acquisition, accessi	on, and other record	ds, check	any of the	e following tha	t are a sign	ificant use of its	s collection	n items
	(check all that apply):								
а	Public exhibition	C	י וווי	oan or ex	change progra	ams			
b	Scholarly research	e	, [ (	Other					
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	in how th	ey further	the organization	on's exemp	ot purpose in Pa	ırt XIII.	
5	During the year, did the organization solicit o	r receive donations	of art, his	storical trea	asures, or othe	er similar as	ssets	_	
	to be sold to raise funds rather than to be ma							Yes	└─ No
Paı	t IV Escrow and Custodial Arran	gements. Compl	ete if the	organizati	on answered "	'Yes" to Fo	rm 990, Part IV	line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.							
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for d	contributio	ns or other as	sets not inc	cluded	_	
	on Form 990, Part X?						L	Yes	└── No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	able:					
								Amount	
С	Beginning balance						1c		
d	Additions during the year						1d		
е	Distributions during the year						1e		
f	Ending balance								
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?				L	Yes	☐ No
	If "Yes," explain the arrangement in Part XIII.								
Pai	t V Endowment Funds. Complete i	f the organization ar	swered	'Yes" to Fo					
		(a) Current year	<b>(b)</b> Pi	rior year	(c) Two year	s back (d)	Three years 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 curr	•	ce (line 1	g, column (	(a)) held as:				
а	Board designated or quasi-endowment		_%						
b	Permanent endowment	%							
С	Temporarily restricted endowment ▶	%							
	The percentages in lines 2a, 2b, and 2c shou	•							
3а	Are there endowment funds not in the posse	ssion of the organiz	ation tha	t are held	and administe	red for the	organization	г	
	by:								Yes No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations							3b	
4	Describe in Part XIII the intended uses of the								
Pai	t VI Land, Buildings, and Equipm								
	Description of property	(a) Cost or o			t or other		umulated	(d) Book	value
		basis (investr	nent)	Dasis	(other)	uepre	ciation		
	Land				20 000	2.2	14 250	10	750
	Buildings				90,000.		4,250.		750.
	Leasehold improvements				50,000.		9,500.	4 (	),500.
	Equipment								
	Other (Oak as a fall as a		· ·	(D) "	10(-) )			ΕΛ	5,250.
Intal	LAdd lines 1a through 1e (Column (d) must e	auai ⊦orm 990. Part	x colum	in (K) line	IU(C) )		<b>▶</b> 1	201	J.⊿⊃U.

Schedule D (Form 990) 2012

Part VII	Investments - Other Securities. See	Form 990. Part X. line 12		
	ption of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
		. ,	,	,
	ial derivatives y-held equity interests			
(3) Other	y-neid equity interests			
(A)				
(B)				
(C)				
(D)				
(E)				
<u>(F)</u>				
(G)				
(H)				
<u>(I)</u>				
	(b) must equal Form 990, Part X, col. (B) line 12.)			
Part VII	I Investments - Program Related. Se			
	(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	(b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX		15		
I dit ix		Description		(b) Book value
	(a) L	эсэсприон		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(8) (9)				
(9) (10)				
(9) (10) <b>Total.</b> (Colu	umn (b) must equal Form 990, Part X, col. (B) line			
(9) (10)	Other Liabilities. See Form 990, Part X, li			▶
(9) (10) <b>Total.</b> (Colu		ne 25.	(b) Book value	▶
(9) (10) Total. (Colu Part X 1.	Other Liabilities. See Form 990, Part X, li	ne 25.	(b) Book value	▶
(9) (10) <b>Total.</b> (Cold <b>Part X</b> <b>1.</b> (1) Fed	Other Liabilities. See Form 990, Part X, li (a) Description of liability	ne 25.	(b) Book value	▶
(9) (10) <b>Total.</b> ( <i>Cold</i> <b>Part X</b> <b>1.</b> (1) Fed (2)	Other Liabilities. See Form 990, Part X, li (a) Description of liability	ne 25.	(b) Book value	▶
(9) (10) Total. (Color Part X 1. (1) Fee (2) (3)	Other Liabilities. See Form 990, Part X, li (a) Description of liability	ne 25.	(b) Book value	▶
(9) (10) Total. (Column 1) Part X 1. (1) Fee (2) (3) (4)	Other Liabilities. See Form 990, Part X, li (a) Description of liability	ne 25.	(b) Book value	>
(9) (10) Total. (Color Part X 1. (1) Fee (2) (3) (4) (5)	Other Liabilities. See Form 990, Part X, li (a) Description of liability	ne 25.	(b) Book value	>
(9) (10) Total. (Colo Part X 1. (1) Fee (2) (3) (4) (5) (6)	Other Liabilities. See Form 990, Part X, li (a) Description of liability	ne 25.	(b) Book value	▶
(9) (10) Total. (Colo Part X 1. (1) Fee (2) (3) (4) (5) (6) (7)	Other Liabilities. See Form 990, Part X, li (a) Description of liability	ne 25.	(b) Book value	▶
(9) (10) Total. (Color Part X 1. (1) Fee (2) (3) (4) (5) (6) (7) (8)	Other Liabilities. See Form 990, Part X, li (a) Description of liability	ne 25.	(b) Book value	▶
(9) (10) Total. (Column 1) Part X  1. (1) Fee (2) (3) (4) (5) (6) (7) (8) (9)	Other Liabilities. See Form 990, Part X, li (a) Description of liability	ne 25.	(b) Book value	▶
(9) (10) Total. (Color Part X 1. (1) Fee (2) (3) (4) (5) (6) (7) (8)	Other Liabilities. See Form 990, Part X, li (a) Description of liability	ne 25.	(b) Book value	▶

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

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ...... ▶

X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2: LPUSA FILES INCOME TAX RETURNS IN THE U.S. FEDERAL

JURISDICTION, ILLINOIS, AND CALIFORNIA. WITH FEW EXCEPTIONS, LPUSA IS NO LONGER SUBJECT TO U.S. FEDERAL, STATE AND LOCAL, OR NON-U.S. INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE 2009. LPUSA DOES NOT EXPECT A MATERIAL NET CHANGE IN UNRECOGNIZED TAX BENEFITS IN THE NEXT TWELVE MONTHS.

Schedule D (Form 990) 2012

#### SCHEDULE F (Form 990)

#### **Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

OMB No. 1545-0047 Open to Public Inspection

**Employer identification number** 

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990.
► See separate instructions.

LANGHAM PARTNER		23-7417198								
Part I General Infor	mation on A	ctivities Ou	tside the United States. Compl	ete if the organ	ization answered "Y	'es"				
to Form 990, Part	: IV, line 14b.									
			ds to substantiate the amount of its gr							
the grantees' eligibility fo	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assi	stance? X	Yes No				
2 For grantmakers. Description	ribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and of	ther assistance outs	side the				
United States.										
3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)										
(a) Region	<b>(b)</b> Number of	(c) Number of employees,	(d) Activities conducted in region	1 ',	vity listed in (d)	(f) Total				
	offices	agents, and	(by type) (e.g., fundraising, program		gram service,	expenditures for and				
	in the region	independent contractors	services, investments, grants to recipients located in the region)	1	e specific type ce(s) in region	investments				
		in region	recipients located in the region)			in region				
				LITERATURE	,					
				PREACHING P						
	_	_		WORLDWIDE M	IINISTRY					
EUROPE	0	0	GRANTS	SUPPORT.		695,231.				
				SUPPORTS EV						
					UDENTS FROM					
					Y WORLD WHO					
SUB-SAHARAN AFRICA	0	0	SCHOLARSHIPS		OSITIONS OF	89,525.				
				SUPPORTS EV						
					UDENTS FROM					
					Y WORLD WHO					
SOUTH AMERICA	0	0	SCHOLARSHIPS		OSITIONS OF	21,999.				
				SUPPORTS EV	ANGELICAL					
				DOCTORAL ST	UDENTS FROM					
EAST ASIA AND THE				THE MAJORIT	Y WORLD WHO					
PACIFIC	0	0	SCHOLARSHIPS	RETURN TO P	OSITIONS OF	36,000.				
				SUPPORTS EV	ANGELICAL					
				DOCTORAL ST	UDENTS FROM					
				THE MAJORIT	Y WORLD WHO					
EUROPE	0	0	SCHOLARSHIPS	RETURN TO P	OSITIONS OF	6,516.				

c Totals (add lines 3a and 3b) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

SEE PART V FOR COLUMN (E) DESCRIPTIONS

PROGRAM SERVICES

0

0

0

Schedule F (Form 990) 2012

611.

849,882.

849,882.

0.

EUROPE

3 a Sub-total

**b** Total from continuation

sheets to Part I ......

BOOK PURCHASES

Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any
	recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND &	LITERATURE PROGRAM, PREACHING PROGRAM AND WORLDWIDE MINISTRY SUPPORT.	695,231.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING ICELAND & GREENLAND) -	SCHOLARSHIP	6,516.	WIRE TRANSFER	0.		
			recognized as charities by the n 501(c)(3) equivalency letter		recognized as tax-e			2

3 Enter total number of other organizations or entities ...

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (h) Method of (b) Region valuation (book, FMV, appraisal, other) (a) Type of grant or assistance recipients cash grant cash disbursement non-cash non-cash assistance assistance SUB-SAHARAN SCHOLARSHIPS AFRICA 8 89,525.WIRE TRANSFER 0. SCHOLARSHIPS SOUTH AMERICA 1 21,999. WIRE TRANSFER 0 EAST ASIA AND THE SCHOLARSHIPS PACIFIC 3 36,000.WIRE TRANSFER 0

#### Part IV | Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2012

Page 5

#### Part V **Supplemental Information**

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

SCHEDULE F, PART I, LINE 2: SCHOLARS PREPARE AND SUBMIT AN ANNUAL BUDGET THAT IS USED TO DETERMINE THE AMOUNT OF SCHOLARSHIP NEEDED. LANGHAM PARTNERSHIP DOES NOT FUND THE ENTIRE BUDGET OR TUITION. THE SCHOLARSHIP IS PAID IN THREE INSTALLMENTS INTO THE STUDENT'S ACCOUNT AT THE EDUCATIONAL INSTITUTION, AND TUITION IS DEDUCTED FIRST. THE LANGHAM PARTNERSHIP SCHOLAR DIRECTOR STAYS IN CLOSE COMMUNICATION WITH THE SCHOLAR AND FACULTY MENTOR, MONITORING PROGRESS. IF THE SCHOLAR DIRECTOR IS SATISFIED WITH THE PROGRESS, THE NEXT INSTALLMENT IS RELEASED.

PART I, LINE 3, COLUMN (E):

REGION: SUB-SAHARAN AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: SUPPORTS EVANGELICAL DOCTORAL STUDENTS FROM THE MAJORITY WORLD WHO RETURN TO POSITIONS OF THEOLOGICAL TEACHING AND LEADERSHIP.

REGION: SOUTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: SUPPORTS EVANGELICAL DOCTORAL STUDENTS FROM THE MAJORITY WORLD WHO RETURN TO POSITIONS OF THEOLOGICAL TEACHING AND LEADERSHIP.

REGION: EAST ASIA AND THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: SUPPORTS EVANGELICAL DOCTORAL STUDENTS FROM THE MAJORITY WORLD WHO RETURN TO POSITIONS OF THEOLOGICAL TEACHING AND LEADERSHIP.

REGION: EUROPE

SPECIFIC TYPES OF SERVICES IN REGION: SUPPORTS EVANGELICAL DOCTORAL

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.

OMB No. 1545-0047 **2012** 

Open to Public Inspection

Name of	the organization	A DENIED GILT	D HOA TNO	MED				Employer identification number
Part I	General Information on Grants a		P USA, INC.	, NFP				23-7417198
							-:	
	es the organization maintain records t							
	teria used to award the grants or assis scribe in Part IV the organization's pro							Zī fes
Part II						anization answered "	Ves" to Form 990 Part	IV line 21 for any
	recipient that received more than \$		<del>-</del>			anization answered	103 101 01111 000,1 a11	TV, IIIC 21, 101 arry
1 (a)	Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
<b>2</b> En	ter total number of section 501(c)(3) a	and government as	ragnizations listed in th	ha lina 1 tabla				
	ter total number of other organizations			ile iiile i table				<u> </u>
	or Paperwork Reduction Act Notice							Schedule I (Form 990) (2012)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance				
SCHOLARSHIPS	14	219,401.	0.						
		,							
Part IV Supplemental Information. Complete this part to provide	de the informatio	n required in Part I,	line 2, Part III, colum	ın (b), and any other additional in	formation.				
SCHEDULE I, PART I, LINE 2: SCHOLA	RS PREPA	RE AND SUB	MIT AN ANN	UAL BUDGET					
THAT IS USED TO DETERMINE THE AMOU	NT OF SC	HOLARSHIP	NEEDED. LA	NGHAM					
PARTNERSHIP DOES NOT FUND THE ENTI	RE BUDGE	T OR TUITI	ON. THE SC	HOLARSHIP IS					
PAID IN THREE INSTALLMENTS INTO TH	E STUDEN	T'S ACCOUN	T AT THE E	DUCATIONAL					
INSTITUTION, AND TUITION IS DEDUCT	ED FIRST	. THE LANG	HAM PARTNE	SHIP SCHOLAR					
DIRECTOR STAYS IN CLOSE COMMUNICAT	ION WITH	THE SCHOL	AR AND FAC	ULTY MENTOR,					
MONITORING PROGRESS. IF THE SCHOLA	R DIRECT	OR IS SATI	SFIED WITH	THE					
PROGRESS, THE NEXT INSTALLMENT IS RELEASED.									

## SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Part I Questions Regarding Compensation

LANGHAM PARTNERSHIP USA, INC., NFP

Employer identification number 23-7417198

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee			
	Independent compensation consultant  X Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		_X_
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		<u> </u>
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			37
_	not described in lines 5 and 6? If "Yes," describe in Part III	7		<u> </u>
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			37
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		<u> </u>
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9	I	I

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

Schedule J (Form 990) 2012

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation	
(A) Name and Title		compensation incentive rep		(iii) Other reportable compensation	compensation	berients	(B)(i)-(D)	reported as deferred in prior Form 990	
(1) BENJAMIN K. HOMAN (i)		138,040.	0.	0.	0.	19,606.	157,646.	0.	
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
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	(ii)					-			
	(i)								
	(ii)								
	(i)								
	(ii)								

## SCHEDULE M (Form 990)

Department of the Treasury

#### **Noncash Contributions**

➤ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

➤ Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

LANGHAM PARTNERSHIP USA, INC., NFP

Employer identification number 23-7417198

Pa	rt I Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of de			
		applicable		Form 990, Part VIII, line 1g	noncash contribu	ition a	mount	S
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	3	51,103.	FAIR MARKET	' VA	LUE	
10	Securities - Closely held stock		_	. ,				
11	Securities - Partnership, LLC, or							
••	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ( )							
26	Other ( )							
27	Other ()							
28	Other ( )							
29	Number of Forms 8283 received by the organi	zation durin	a the tax vear for a	contributions				
	for which the organization completed Form 8283, Part IV, Donee Acknowledgement							
	3	, ,		J			Yes	No
30a	During the year, did the organization receive b	v contributio	on anv property re	ported in Part I. lines 1-28 th	at it must hold for			
	at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for							
	the entire holding period?		•	•		30a		Х
b	If "Yes," describe the arrangement in Part II.							
31								Х
	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?  Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash							
	contributions?							х
b	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	column (c) f	or a type of prope	rty for which column (a) is cl	necked.			
-	describe in Part II.							
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2012							2012)

232141 12-20-12

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

#### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

LANGHAM PARTNERSHIP USA, INC., NFP

Employer identification number 23-7417198

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

WORLD WIDE MINISTRY SUPPORT FOR PROGRAMS WHICH FURTHER MEET THE GOALS

OF LANGHAM PARTNERSHIP.

EXPENSES \$ 296,559. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 4: THE ORGANIZATION CHANGED ITS NAME FROM JOHN STOTT MINISTRIES TO LANGHAM PARTNERSHIP USA, INC., NFP.

FORM 990, PART VI, SECTION B, LINE 11: THE LANGHAM PARTNERSHIP AUDIT COMMITTEE REVIEWS THE FORM 990 AND APPROVES IT.

FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD FORMALLY ASCRIBES TO

THIS POLICY ANNUALLY, AND THE POLICY IS MONITORED BY THE AUDIT & INVESTMENT

COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 15: WHEN THE BUDGET INDICATES THAT THE MINISTRY CAN SUPPORT SALARY INCREASES, INDUSTRY AND REGIONAL DATA ARE REVIEWED TO DETERMINE THE SALARY RANGE FOR EACH POSITION CONSIDERED FOR A SALARY INCREASE. FOR THE LANGHAM PARTHERSHIP PRESIDENT, THE BOARD MAKES A RECOMMENDATION, OPENS THE RECOMMENDATION FOR DISCUSSION, AND VOTES ON THE SALARY INCREASE. FOR ALL OTHER SALARY INCREASES, THE LANGHAM PARTNERSHIP PRESIDENT WAITS FOR BOARD APPROVAL OF THE BUDGET CONTAINING THE SALARY INCREASES, AND DETERMINES THE INDIVIDUAL INCREASES BASED UPON EMPLOYEE PERFORMANCE.

FORM 990, PART VI, SECTION C, LINE 19: THE STATEMENT OF FAITH IS POSTED ON LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012)

Name of the organization  LANGHAM PARTNERSHIP USA, INC., NFP	Employer identification number 23-7417198
THE LANGHAM PARTNERSHIP WEBSITE. ALL OTHER DOCUMENTS ARE	AVAILABLE UPON
REQUEST.	
TORM 000 DARM WIT LINE 2	
FORM 990, PART XII, LINE 2:	
FINANCIAL STATEMENTS AND REPORTING  THERE HAS BEEN NO CHANGE IN THE PROCESS FROM PRIOR YEARS.	
THERE HAS BEEN NO CHANGE IN THE PROCESS FROM PRIOR TEARS.	