

Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
 benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047
2009
 Open to Public Inspection

A For the 2009 calendar year, or tax year beginning **06/01/09**, and ending **05/31/10**

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

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

C Name of organization
Bridgeport Rescue Mission, Inc.
 Doing Business As
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
P.O. Box 9057
 City or town, state or country, and ZIP + 4
Bridgeport CT 06601

D Employer identification number
06-1362705

E Telephone number
203-333-4087

G Gross receipts \$ **2,366,983**

F Name and address of principal officer:
Rev. Terence Wilcox
P.O.Box 9057
Bridgeport CT 06601

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

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

J Website: **www.bridgeportrescuemission.org**

H(c) Group exemption number **u**

K Type of organization: Corporation Trust Association Other **u**

L Year of formation: **1993** **M** State of legal domicile: **CT**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: The mission of Bridgeport Rescue Mission is to embrace the urban poor with the compassion of Christ, giving hope and healing for a changed life. (See Schedule O)		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	6
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	6
	5 Total number of employees (Part V, line 2a)	5	27
	6 Total number of volunteers (estimate if necessary)	6	550
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	2,336,674	2,330,993
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	14,244	6,303
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-20,654	-14,494
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,330,264	2,322,802
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	586,503
14 Benefits paid to or for members (Part IX, column (A), line 4)			
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		798,509	868,947
16a Professional fundraising fees (Part IX, column (A), line 11e)		26,921	18,000
b Total fundraising expenses (Part IX, column (D), line 25) u 560,163			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		922,758	827,446
Net Assets or Fund Balances	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,334,691	2,330,200
	19 Revenue less expenses. Subtract line 18 from line 12	-4,427	-7,398
	20 Total assets (Part X, line 16)	Beginning of Current Year 2,003,914	End of Year 2,009,329
	21 Total liabilities (Part X, line 26)	60,363	62,382
22 Net assets or fund balances. Subtract line 21 from line 20	1,943,551	1,946,947	

Part II Signature Block

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

Sign Here

Signature of officer: **Rev. Terence Wilcox** Date: **Executive Director**
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature: **Leslie Nieskens** Date: **04/13/11** Check if self-employed Preparer's identifying number (see instructions)
 Firm's name (or yours if self-employed), address, and ZIP + 4: **Lambrides, Lamos, Taylor LLP** EIN **u**
81 Larkfield Rd Phone no. **u631-754-4242**
East Northport, NY 11731

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

The mission of Bridgeport Rescue Mission is to embrace the urban poor with the compassion of Christ, giving hope and healing for a changed life. (See Schedule O)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **1,484,460** including grants of \$ **615,807**) (Revenue \$)

Bridgeport Rescue Mission demonstrates the love of God to hungry, homeless and addicted people throughout Fairfield County, 24 hours a day, 365 days a year. We provide a place of hope and dignity, fighting poverty from the inside out. Through our New Life Discipleship Program we offer a yearlong education program, biblical counseling and case management. We are funded by compassionate individuals, churches, businesses, organizations and foundations, trusting in God to meet our needs.

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

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

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses u 1,484,460

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	N/A	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
	<ul style="list-style-type: none"> ● Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. ● Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. ● Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. ● Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. ● Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. ● Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X. 		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	1a 1		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 27		
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 this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		N/A
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: u See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		N/A
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	N/A	7d
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	X	
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		N/A
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	X	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		N/A
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		N/A
b	Did the organization make a distribution to a donor, donor advisor, or related person?		N/A
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	N/A	10a
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	N/A	10b
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	N/A	11a
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	N/A	11b
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		N/A
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	N/A	12b

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.

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body? N/A		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? N/A		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13	Does the organization have a written whistleblower policy?		X
14	Does the organization have a written document retention and destruction policy?		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? N/A		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **u CT**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **u Michael Cobb** **1088 Fairfield Avenue**
Bridgeport **CT 06605** **203-333-4087**

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

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. Use Schedule J-2 if additional space is needed.

- 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. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Robert L. Fiscus Vice President	1.00	X		X				0	0	0
Robert E. Knapp President	1.00	X		X				0	0	0
Kevin Wilcox Treasurer	1.00	X		X				0	0	0
Randall Seymore Secretary	1.00	X		X				0	0	0
Crissie Fortmeyer Director	1.00	X						0	0	0
Pastor Larry Fullerton Director	1.00	X						0	0	0
Rev. Terence Wilcox Executive Director	55.00			X				60,621	0	74,697
Michael Cobb Dir. of Operations	55.00			X				44,075	0	29,514

Part VIII Statement of Revenue			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a	6,493				
	b Membership dues	1b					
	c Fundraising events	1c	322,870				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	2,001,630				
	g Noncash contributions included in lines 1a-1f: \$		615,807				
	h Total. Add lines 1a-1f	u	2,330,993				
Program Service Revenue	2a	Busn. Code					
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f	u					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	u	6,303			6,303	
	4 Income from investment of tax-exempt bond proceeds	u					
	5 Royalties	u					
	6a Gross Rents	(i) Real	(ii) Personal				
		b Less: rental exps.					
		c Rental inc. or (loss)					
		d Net rental income or (loss)	u				
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less: cost or other basis & sales exps.					
		c Gain or (loss)					
		d Net gain or (loss)	u				
	8a Gross income from fundraising events (not including \$ 322,870 of contributions reported on line 1c). See Part IV, line 18	a		27,687			
		b Less: direct expenses	b	44,181			
		c Net income or (loss) from fundraising events	u	-16,494			-16,494
	9a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses		b					
c Net income or (loss) from gaming activities		u					
10a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory	u					
Miscellaneous Revenue		Busn. Code					
11a Miscellaneous income			2,000			2,000	
b							
c							
d All other revenue							
e Total. Add lines 11a-11d	u		2,000				
12 Total Revenue. See instructions.	u		2,322,802	0	0	-8,191	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	615,807	615,807		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	206,260	18,215	140,953	47,092
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	521,944	318,319	39,842	163,783
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	98,602	65,072	1,426	32,104
10 Payroll taxes	42,141	20,469	9,288	12,384
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	22,312		22,312	
d Lobbying				
e Professional fundraising services. See Part IV, line 7	18,000			18,000
f Investment management fees				
g Other	1,651			1,651
12 Advertising and promotion				
13 Office expenses	103,518	42,758	6,616	54,144
14 Information technology	16,931		428	16,503
15 Royalties				
16 Occupancy	136,975	131,541	4,079	1,355
17 Travel	16,578	268	9,792	6,518
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	45,990	27,594	13,797	4,599
23 Insurance	55,196	49,124	5,520	552
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a Monthly mailings, advert.	170,498			170,498
b Food expense	69,870	69,870		
c Maintenance and repairs	61,723	61,723		
d Miscellaneous	41,957	27,241	14,443	273
e Vehicle expense	31,534	30,117	1,012	405
f All other expenses	52,713	6,342	16,069	30,302
25 Total functional expenses. Add lines 1 through 24f	2,330,200	1,484,460	285,577	560,163
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	66,131	1	230,309
	2	Savings and temporary cash investments	308,819	2	347,609
	3	Pledges and grants receivable, net	175,742	3	
	4	Accounts receivable, net	4,000	4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	19,421	9	15,120
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,640,465		
	b	Less: accumulated depreciation	10b 390,934	10c	1,249,531
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	155,966	15	166,760
16	Total assets. Add lines 1 through 15 (must equal line 34)	2,003,914	16	2,009,329	
Liabilities	17	Accounts payable and accrued expenses	60,363	17	62,382
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	60,363	26	62,382
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	1,226,206	27	1,262,471
	28	Temporarily restricted net assets	561,379	28	517,716
	29	Permanently restricted net assets	155,966	29	166,760
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	1,943,551	33	1,946,947
34	Total liabilities and net assets/fund balances	2,003,914	34	2,009,329	

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

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

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

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

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

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. **N/A**

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization **Bridgeport Rescue Mission, Inc.** Employer identification number **06-1362705**

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

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

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) u	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,418,369	2,533,216	1,624,441	2,336,674	2,330,993	10,243,693
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1,418,369	2,533,216	1,624,441	2,336,674	2,330,993	10,243,693
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						915,432
6 Public support. Subtract line 5 from line 4						9,328,261

Section B. Total Support

Calendar year (or fiscal year beginning in) u	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	1,418,369	2,533,216	1,624,441	2,336,674	2,330,993	10,243,693
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,573	22,997	26,320	14,244	6,303	78,437
9 Net income from unrelated business activities, whether or not the business is regularly carried on					0	
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	11,842	2,350	8,113	1,814	2,000	26,119
11 Total support. Add lines 7 through 10						10,348,249
12 Gross receipts from related activities, etc. (see instructions)					12	148,380
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	90.14 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	88.79 %
16a 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

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

Section B. Total Support

Calendar year (or fiscal year beginning in) u	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

- 19a 33 1/3 % support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3 % support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Part II, Line 10 - Other Income Detail

Miscellaneous income \$ 26,119

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

u Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

u Attach to Form 990. u See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization: Bridgeport Rescue Mission, Inc. Employer identification number: 06-1362705

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? (Yes/No), 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? (Yes/No)

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

1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of certified historic structure. 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Table: Held at the End of the Tax Year (2a-2d). 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year. 4 Number of states where property subject to conservation easement is located. 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? (Yes/No). 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year. 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year. 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? (Yes/No). 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 u \$; (ii) Assets included in Form 990, Part X u \$. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 u \$; b Assets included in Form 990, Part X u \$.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIV and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b** If "Yes," explain the arrangement in Part XIV.

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

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

- 2** Provide the estimated percentage of the year end balance held as:
- a** Board designated or quasi-endowment **u** _____ %
 - b** Permanent endowment **u** _____ %
 - c** Term endowment **u** _____ %
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		235,405		235,405
b Buildings		1,191,916	230,946	960,970
c Leasehold improvements				
d Equipment		176,056	147,320	28,736
e Other		37,088	12,668	24,420
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)			u	1,249,531

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	2,322,802
2	Total expenses (Form 990, Part IX, column (A), line 25)	2,330,200
3	Excess or (deficit) for the year. Subtract line 2 from line 1	-7,398
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV.)	10,794
9	Total adjustments (net). Add lines 4 through 8	10,794
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	3,396

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	2,393,776
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a	Net unrealized gains on investments	
b	Donated services and use of facilities	60,180
c	Recoveries of prior year grants	
d	Other (Describe in Part XIV.)	10,794
e	Add lines 2a through 2d	70,974
3	Subtract line 2e from line 1	2,322,802
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	
b	Other (Describe in Part XIV.)	
c	Add lines 4a and 4b	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	2,322,802

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	2,390,380
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a	Donated services and use of facilities	60,180
b	Prior year adjustments	
c	Other losses	
d	Other (Describe in Part XIV.)	
e	Add lines 2a through 2d	60,180
3	Subtract line 2e from line 1	2,330,200
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	
b	Other (Describe in Part XIV.)	
c	Add lines 4a and 4b	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	2,330,200

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part X - Liability Under FIN 48 Footnote

The organization's current accounting policy is to disclose liabilities for uncertain tax positions when a liability is probable and estimable.

Management is not aware of any violation of its tax status as an organization exempt from income taxes, nor is it aware of any exposure to unrelated business income tax.

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
u Attach to Form 990 or Form 990-EZ. u See separate instructions.

OMB No. 1545-0047

2009

Open To Public Inspection

Name of the organization

Bridgeport Rescue Mission, Inc.

Employer identification number

06-1362705

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Enex Group	Consulting		X		18,000	0
Total					18,000	

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Connecticut

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		Banquet (event type)	Hearts of Hope (event type)	None (total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts	238,355	112,202	350,557
	2	Less: Charitable contributions	217,635	105,235	322,870
	3	Gross revenue (line 1 minus line 2)	20,720	6,967	27,687
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	33,432	10,749	44,181
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Combine line 3, column (d), and line 10				-16,494

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Combine line 1, column d, and line 7				

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities:		
a Is the organization licensed to operate gaming activities in each of these states?	9a	
b If "No," Explain:		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If "Yes," Explain:		
11 Does the organization operate gaming activities with nonmembers?	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

			Yes	No
13 Indicate the percentage of gaming activity operated in:				
a	The organization's facility	13a	%	
b	An outside facility	13b	%	
14 Provide the name and address of the person who prepares the organization's gaming/special events books and records:				
Name u				
Address u				
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a		
b	If "Yes," enter the amount of gaming revenue received by the organization u\$ and the amount of gaming revenue retained by the third party u\$			
c	If "Yes," enter name and address of the third party:			
Name u				
Address u				
16 Gaming manager information:				
Name u				
Gaming manager compensation u\$				
Description of services provided u				
<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor				
17 Mandatory distributions:				
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a		
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year u\$			

SCHEDULE I (Form 990)

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

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

u Attach to Form 990.

Name of the organization

Bridgeport Rescue Mission, Inc.

Employer identification number

06-1362705

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of non-cash assistance, (h) Purpose of grant or assistance.

- 2 Enter total number of section 501(c)(3) and government organizations
3 Enter total number of other organizations

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Relief provided to the			615,807	Selling	Food, clothing,
poor and disadvantaged.				price	and household
No. of Recipients-see					sundries.
Part IV.					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Part IV - Additional Information

In 2010, the Mission provided 585,000 meals and provided 40,150 nights of shelter. The average recipient of food received 105 meals, which translates to approximately 5,600 people being fed. The average recipient of shelter received 120 nights of shelter, which translates to 334 people being temporarily housed. In addition, over 2,430 people received clothing from the Bridgeport Rescue Mission.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2009

**Open To Public
Inspection**

Name of the organization

Bridgeport Rescue Mission, Inc.

Employer identification number

06-1362705

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		300	Cost or selling price
5 Clothing and household goods	X		410,007	Cost or selling price
6 Cars and other vehicles	X	2	3,990	Cost or selling price
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
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	X	577	193,264	Cost or selling price
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other u(Gift cards)	X	29	4,605	Cost or selling price
26 Other u(Tickets)	X	6	3,641	Cost or selling price
27 Other u()				
28 Other u()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that 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?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Part I, Line 32b - Third Party Used to Process Noncash Contributions

When stock is donated as a gift in kind, it is immediately sold through a third party broker and converted to cash as expeditiously as possible.

Schedule M - Supplemental Information

The Mission is reporting the number of contributions per donor, not the number of items received.

The Mission has a gift acceptance policy for common gifts-in-kind. Exceptional gifts, however are handled on an individual basis, taking into consideration the wishes of the donor, the needs of the mission and the priorities set by the Mission's leadership.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990

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

OMB No. 1545-0047

2009

Open to Public
Inspection

Bridgeport Rescue Mission, Inc.

Employer identification number
06-1362705

Form 990, Part VI, Line 8b - Documentation by Committee Explanation

Committees were not given the authority to act on behalf of the governing body.

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

The 990 is reviewed first by the Director of Operations and then presented to the Board for final approval.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

On an annual basis, Board members are asked to review the policy, disclose any potential or known conflicts of interest and sign off on the policy.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

The Executive Director's compensation is reviewed by the Board of Directors via comparaisons to third party market data. The compensation is approved and the approval is noted in the Board Minutes.

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

The organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request.

Additionally, the organizations financial statements and 990 public inspection copy are available to view on its website.

Schedule O - Additional Information

Name of the organization Bridgeport Rescue Mission, Inc.	Employer identification number 06-1362705
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Form 990, Part XI, Line 2c - Audit Oversight

Although the organization has not formally established a committee, the board delegates the responsibility to 2-3 independent board members to oversee the audit and to meet with the auditor.

Form 990, Part I, Line 1 / Part III, Line 1 -

The mission of Bridgeport Rescue Mission is to embrace the urban poor with the compassion of Christ, giving hope and healing for a changed life.

Bridgeport Rescue Mission demonstrates the love of God to hungry, homeless and addicted people throughout Fairfield County and lives out its mission in the following ways:

- By Embrace we mean to welcome, to encircle with our arms.

- By Urban Poor we mean those with severely limited resources who live in the city.

- By Compassion we mean to love and touch others, as Christ loved us.

- By Hope we mean providing encouragement and resources for a new start.

- By Healing we mean being restored in body, mind, and spirit through a personal relationship with Jesus Christ.

- By Changed Life we mean going in a new direction and to realize our God-given purpose.

- By Home we mean having the opportunity to earn a living, secure housing, and be a healthy family again.

Name of the organization

Bridgeport Rescue Mission, Inc.

Employer identification number

06-1362705

Form 990, Part VII -

Total Officers' compensation (combined columns) differs from Part IX, line 5 because part VII is determined on a calendar year while Part IX (Statement of Functional Expenses) is on a fiscal year basis.

Form 990, Schedule G, Part 1 -

The professional fundraiser does not have control or custody of funds. Per the Organization's agreement with the professional fundraiser, the fundraiser will receive \$1,500/month for consulting service, reimbursed travel expenses and reimbursement for direct mail pieces such as offset printing, interviewing, copy writing, designing, segmentation and coding of mailing donor groups, etc. The reimbursement of expenses for direct mail pieces equaled \$204,519 in fiscal 09/10.

Connecticut Statements

Statement 1 - Form PCUREG-01, Line 8 - Outside Fund-Raiser to be Used Next Year

Description

Enex Group
2145 Wake Forest Court
Colorado Springs, CO, 80918

Statement 2 - Form PCUREG-01, Line 9 - Outside Fund-Raiser Used Since Last Report

Description

Enex Group
2145 Wake Forest Court
Colorado Springs, CO, 80918

Connecticut Statements

Statement 3 - Form PCUREG-01 - List of Officer, Directors, Trustees and Key Employees

<u>Officer Name</u>	<u>Business Name 1</u>	<u>City</u>	<u>State</u>	<u>Zip Code</u>
<u>Title</u>	<u>Address</u>			
Rev. Terence Wilcox				
Executive Director	P.O. Box 9057	Bridgeport	CT	06601
Michael Cobb				
Dir. of Operations	P.O. Box 9057	Bridgeport	CT	06601
Robert L. Fiscus				
Vice President	P.O. Box 9057	Bridgeport	CT	06601
Robert E. Knapp				
President	P.O. Box 9057	Bridgeport	CT	06601
Kevin Wilcox				
Treasurer	P.O. Box 9057	Bridgeport	CT	06601
Randall Seymore				
Secretary	P.O. Box 9057	Bridgeport	CT	06601
Crissie Fortmeyer				
Director	P.O. Box 9057	Bridgeport	CT	06601
Pastor Larry Fullerton				
Director	P.O. Box 9057	Bridgeport	CT	06601

Bridgeport Rescue Mission, Inc.

**Financial Statements
and
Auditor's Report**

Year Ended May 31, 2010

Bridgeport Rescue Mission, Inc.

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The Board of Directors
Bridgeport Rescue Mission, Inc.

Independent Auditor's Report

We have audited the accompanying statement of financial position of Bridgeport Rescue Mission, Inc. as of May 31, 2010 and the related statements of activities, of cash flows and of functional expenses for the year then ended. These financial statements are the responsibility of Bridgeport Rescue Mission's management. Our responsibility is to express an opinion on these financial statements based on our audit. The prior year summarized comparative information has been derived from the organization's May 31, 2009 financial statements and, in our report dated December 15, 2009, we expressed an unqualified opinion on those financial statements.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Bridgeport Rescue Mission, Inc. as of May 31, 2010, and the changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

Lambrides, Lamos, Taylor LLP

September 1, 2010

Bridgeport Rescue Mission, Inc.
Statement of Financial Position
May 31, 2010
With Comparative Figures at May 31, 2009

ASSETS	2010	2009
Cash and cash equivalents	\$ 414,564	\$ 109,843
Cash restricted for women's program	163,354	265,107
Grant receivable		179,742
Prepaid expense	15,120	19,421
Beneficial interest in perpetual trust	166,760	155,966
Land, buildings and equipment (net of accumulated depreciation)	<u>1,249,531</u>	<u>1,273,835</u>
Total assets	<u>\$ 2,009,329</u>	<u>\$ 2,003,914</u>
 LIABILITIES AND NET ASSETS		
Liabilities:		
Accounts payable and accrued expenses	<u>\$ 62,382</u>	<u>\$ 60,363</u>
Total liabilities	<u>62,382</u>	<u>60,363</u>
 Net assets:		
Unrestricted	1,262,471	1,226,206
Temporarily restricted	517,716	561,379
Permanently restricted	<u>166,760</u>	<u>155,966</u>
Total net assets	<u>1,946,947</u>	<u>1,943,551</u>
Total liabilities and net assets	<u>\$ 2,009,329</u>	<u>\$ 2,003,914</u>

See notes to financial statements.

Bridgeport Rescue Mission, Inc.
Statement of Activities
For the Year Ended May 31, 2010
With Summarized Comparative Figures for the Year Ended May 31, 2009

	Unrestricted	Temporarily Restricted	Permanently Restricted	2010 Totals	2009 Totals
Support, revenue and releases:					
Contributions	\$ 1,371,916	\$ 20,400		\$ 1,392,316	\$ 1,535,065
Donated food, supplies and services	675,987			675,987	727,204
Special events:					
Contributions	\$ 322,870				
Revenue	27,687				
Less: direct expenses	<u>(44,181)</u>				
Net revenue from special events	306,376			306,376	148,623
Interest income	193	698		891	6,703
Investment income	5,412			5,412	7,541
Miscellaneous income	2,000			2,000	1,814
Net assets released from restrictions - operating	<u>43,226</u>	<u>(43,226)</u>		<u> </u>	<u> </u>
Total support, revenue and releases	<u>2,405,110</u>	<u>(22,128)</u>		<u>2,382,982</u>	<u>2,426,950</u>
Expenses:					
Program	1,517,046			1,517,046	1,597,792
Management and general	271,780			271,780	244,565
Development and public relations	<u>555,564</u>			<u>555,564</u>	<u>538,732</u>
Total expenses before depreciation	<u>2,344,390</u>			<u>2,344,390</u>	<u>2,381,089</u>
Change in net assets before other changes in net assets	60,720	(22,128)		38,592	45,861
Other changes in net assets:					
Net assets released from restrictions - capital expenditures	21,535	(21,535)			
Change in value of beneficial interest in perpetual trust			\$ 10,794	10,794	(37,839)
Depreciation	<u>(45,990)</u>			<u>(45,990)</u>	<u>(50,288)</u>
Change in net assets	36,265	(43,663)	10,794	3,396	(42,266)
Net assets at beginning of year	<u>1,226,206</u>	<u>561,379</u>	<u>155,966</u>	<u>1,943,551</u>	<u>1,985,817</u>
Net assets at end of year	<u>\$ 1,262,471</u>	<u>\$ 517,716</u>	<u>\$ 166,760</u>	<u>\$ 1,946,947</u>	<u>\$ 1,943,551</u>

See notes to financial statements.

Bridgeport Rescue Mission, Inc.
Statement of Cash Flows
For the Year Ended May 31, 2010
With Comparative Figures for the Year Ended May 31, 2009

	2010	2009
Cash flows from operating activities:		
Change in net assets	\$ 3,396	\$ (42,266)
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Depreciation	45,990	50,288
Change in beneficial interest in perpetual trust	(10,794)	37,839
Release of restricted cash for women's program	101,753	303,733
Contributions restricted/designated for women's program	(2,000)	(202,409)
Interest restricted for women's program	(698)	(4,394)
(Increase) decrease in:		
Prepaid expense	4,301	(19,421)
Increase (decrease) in:		
Accounts payable and accrued expenses	2,019	8,100
Deferred revenue	_____	(20,090)
Net cash provided by operating activities	<u>143,967</u>	<u>111,380</u>
Cash flows from investing activities:		
Cash received from disposal of assets	2,000	2,614
Acquisition of fixed assets - women's program		(178,932)
Acquisition of fixed assets	<u>(21,686)</u>	<u>(53,477)</u>
Net cash used by investing activities	<u>(19,686)</u>	<u>(229,795)</u>
Cash flows from financing activities:		
Collection of restricted cash for women's program	<u>180,440</u>	<u>27,061</u>
Net cash provided by financing activities	<u>180,440</u>	<u>27,061</u>
Net increase (decrease) in cash	304,721	(91,354)
Cash and cash equivalents at beginning of year	<u>109,843</u>	<u>201,197</u>
Cash and cash equivalents at end of year	<u>\$ 414,564</u>	<u>\$ 109,843</u>

See notes to financial statements.

Bridgeport Rescue Mission, Inc.
Statement of Functional Expenses
For the Year Ended May 31, 2010
With Summarized Comparative Figures for the Year Ended May 31, 2009

	Program Services	Management and General	Development and Public Relations	2010 Totals	2009 Totals
Salaries	\$ 333,148	\$ 151,160	\$ 201,561	\$ 685,869	\$ 620,011
Payroll taxes	20,469	9,288	12,384	42,141	39,960
Other benefits	68,458	31,061	41,418	140,937	147,539
Grants of food, clothing and household supplies	675,987			675,987	683,189
Food expense	69,870			69,870	75,336
Monthly mailings and advertising			170,498	170,498	194,042
Professional fees		22,312	19,651	41,963	68,016
Occupancy expense	34,800			34,800	31,892
Telephone	3,517	2,328	2,328	8,173	8,909
Utilities	96,741	4,079	1,355	102,175	154,441
Equipment	2,408	3,396		5,804	7,031
Information technology		428	16,503	16,931	7,562
Hospitality and travel	268	9,792	6,518	16,578	8,540
Vehicle expense	30,117	1,012	405	31,534	36,317
Training and resource materials	5,944	7,832	3,062	16,838	15,049
Insurance	49,124	5,520	552	55,196	49,769
Dues and memberships	398	5,037		5,435	2,713
Maintenance and repairs	61,723			61,723	89,024
Printing, postage and shipping		573	50,412	50,985	60,304
Supplies	36,833	319	1,404	38,556	44,522
Indirect special events expenses			22,302	22,302	17,946
Bank and credit card fees		3,200	4,938	8,138	1,953
Miscellaneous	27,241	14,443	273	41,957	17,024
	<u>1,517,046</u>	<u>271,780</u>	<u>555,564</u>	<u>2,344,390</u>	<u>2,381,089</u>
Total expenses before depreciation					
Depreciation	<u>27,594</u>	<u>13,797</u>	<u>4,599</u>	<u>45,990</u>	<u>50,288</u>
Total expenses	<u>\$ 1,544,640</u>	<u>\$ 285,577</u>	<u>\$ 560,163</u>	<u>\$ 2,390,380</u>	<u>\$ 2,431,377</u>

See notes to financial statements.

Bridgeport Rescue Mission, Inc.
Notes to Financial Statements
May 31, 2010

1. Organization and Purpose:

The Bridgeport Rescue Mission, Inc. (the Mission) is a Christian, nonprofit corporation founded in 1993 under the nonprofit corporation laws of the State of Connecticut. The objective of the Mission is to promote and practice the life changing gospel of Jesus Christ through Christian service to the poor and disadvantaged, which it accomplishes through its New Life Program that includes the operation of two adult shelters, a mobile soup kitchen, and various outreach programs in Bridgeport, Connecticut. The Mission obtains contributions from individuals, businesses, area foundations and religious organizations to help achieve its objectives.

The Mission is exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code.

2. Summary of Significant Accounting Policies:

The significant accounting policies followed are described below to enhance the usefulness of the financial statements to the reader.

a. Accrual Basis Financial Statements

The accompanying financial statements have been prepared on the accrual basis and conform to accounting principles generally accepted in the United States of America and in accordance with the principles of not-for-profit accounting.

b. Net Assets

The net assets of the Mission and changes therein are classified and reported as follows:

- Unrestricted net assets include all resources which are not subject to donor-imposed restrictions of a more specific nature than those which only obligate the Mission to utilize funds in furtherance of its mission.
- Temporarily restricted net assets carry specific, donor-imposed restrictions on the expenditure or other use of contributed funds. Temporary restrictions may expire either because certain actions are taken by the Mission which fulfill the restrictions or because of the passage of time. Expirations of temporary restrictions on net assets (i.e., the donor-stipulated purpose has been fulfilled and/or the stipulated time period has elapsed) are reported as reclassifications between the applicable classes of net assets.
- Permanently restricted net assets are those that are subject to donor-imposed restrictions which will never lapse, thus requiring that the funds be permanently retained. Generally, the donors of these funds permit the Mission to use all or part of the income earned on related investments, and the net capital appreciation thereon, for general or specific purposes.

Bridgeport Rescue Mission, Inc.
Notes to Financial Statements
May 31, 2010

2. Summary of Significant Accounting Policies: (Continued)

c. Contributions

Contributions are recorded as revenue upon receipt of cash or unconditional promises to give (pledges). Contributions are considered available for unrestricted use unless specifically restricted by the donor.

Contributions of land, buildings and equipment without donor stipulation concerning the use of such long-lived assets are reported as revenues of the unrestricted net assets.

Contributions of cash or other assets to be used to acquire property, plant and equipment are reported as revenue of the temporarily restricted net assets; the restrictions are considered to be released at the time of acquisition of such long-lived assets.

d. Cash and Cash Equivalents

Cash and cash equivalents include all unrestricted cash on hand and in banks. The Mission also considers all highly liquid unrestricted investments with a maturity of three months or less when purchased to be cash equivalents.

e. Land, Buildings and Equipment

Land, buildings and equipment are stated at cost, or, if donated, at the estimated fair market value at the date of donation. Depreciation is recorded using the straight-line method at various rates calculated to allocate the cost of the respective items over their estimated useful lives.

Estimated useful lives are:

Buildings and improvements	15 - 40 years
Furniture, fixtures and equipment	5 - 10 years
Vehicles	5 years

f. Donated Services

Donated services are recognized as contributions if the services (a) create or enhance nonfinancial assets or (b) require specialized skills, are performed by individuals with those skills, and would otherwise be purchased by the organization. These services are valued based on the estimated cost of services that would have otherwise had to have been purchased.

g. Accounting for Uncertainty in Income Taxes

The Mission's current accounting policy is to disclose liabilities for uncertain tax positions when a liability is probable and estimable. Management is not aware of any violation of its tax status as an organization exempt from income taxes, nor is it aware of any exposure to unrelated business income tax.

Bridgeport Rescue Mission, Inc.
Notes to Financial Statements
May 31, 2010

2. Summary of Significant Accounting Policies: (Continued)

h. Expense Allocations

Directly identifiable expenses are charged to programs and supporting services. Expenses related to more than one function are charged to programs and supporting services on the basis of periodic time and expense studies. Fundraising and administrative expenses include those expenses that are not directly identifiable with any other specific function but provide for the overall support and direction of the organization.

i. Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from their estimates.

j. Reclassifications

Certain amounts previously reported in the financial statements for May 31, 2009 have been reclassified to facilitate comparability with the May 31, 2010 amounts with no effect on the change in net assets as previously reported.

k. Prior Year Summarized Comparative Information

The financial statements include certain prior-year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with accounting principles generally accepted in the United States of America. Accordingly, such information should be read in conjunction with the Mission's financial statements for the year ended May 31, 2009, from which the summarized information was derived.

3. Concentrations of Risk:

Significant concentrations of credit risk arise from cash deposits in excess of federally insured amounts. Cash and cash equivalents include checking and money market funds held at a bank, which exceed the federally insured limit by \$209,997 at May 31, 2010.

4. Beneficial Interest in Perpetual Trust – Permanently Restricted:

The Mission is the beneficiary of a permanently restricted trust. The principal must be held in perpetuity by the trustee, with a portion of the income distributed quarterly to the Mission. During 2010, distributions totaled \$5,412 and were reflected in investment income.

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5. Land, Buildings, and Equipment:

A summary of land, buildings, and equipment follows:

Land	\$ 235,405
Buildings and improvements	1,191,916
Furniture, fixtures and equipment	176,056
Vehicles	<u>37,088</u>
	1,640,465
Less accumulated depreciation	<u>(390,934)</u>
	<u>\$1,249,531</u>

6. Gifts in Kind:

The Mission receives contributions of food, toiletries, clothing and household items which it uses and distributes in the operation of its program. The total amount of in-kind contributions received during the 2010 fiscal year was \$675,988.

7. Temporarily Restricted Net Assets:

Temporarily restricted net assets are available for the following purposes:

Video camera	\$ 1,200
Men's Adopt-A-Room	8,761
Mobile soup kitchen	5,882
Reserve fund	40,393
Women's program	<u>461,480</u>
	<u>\$517,716</u>

8. Fair Value Measurements:

In determining fair value, the Mission uses various valuation approaches within the *Fair Value Measurements and Disclosures Topic of the FASB Accounting Standards Codification* fair value measurement framework. Fair value measurements are determined based on the assumptions that market participants would use in pricing an asset or liability.

The *Fair Value Measurements and Disclosures Topic of the FASB Accounting Standards Codification* established a fair value hierarchy for valuation inputs that gives the highest priority to quoted prices in active markets for identical assets or liabilities and the lowest priority to unobservable inputs. The fair value hierarchy is as follows:

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8. Fair Value Measurements: (Continued)

Level 1 inputs: In general, fair values determined by Level 1 inputs use quoted prices in active markets for identical assets or liabilities that the Mission has the ability to access.

Level 2 inputs: Fair values determined by Level 2 inputs use other inputs that are observable, either directly or indirectly. These Level 2 inputs include quoted prices for similar assets and liabilities in active markets, and other inputs such as interest rates and yield curves that are observable at commonly quoted intervals.

Level 3 inputs: Level 3 inputs are unobservable inputs, including inputs that are available in situations where there is little, if any, market activity for the related assets or liability.

In instances where inputs used to measure fair value fall into different levels in the above fair value hierarchy, fair value measurements in the entirety are categorized based on the lowest level input that is significant to the valuation. The Mission's assessment of the significance of the particular inputs to these fair value measurements requires judgment and considers factors of each asset or liability.

Disclosures concerning assets and liabilities measured at fair value on a recurring basis are as follows:

	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Assets:				
Beneficial interest in perpetual trust	\$ 166,760	\$ 166,760	_____	_____
Total Assets at Fair Value	<u>\$ 166,760</u>	<u>\$ 166,760</u>	<u>\$ -</u>	<u>\$ -</u>

9. Subsequent Events:

Management of the Mission evaluated subsequent events through September 1, 2010, which is the date the financial statements were available to be issued. They discovered no additional subsequent events that should be disclosed.