

Bardolph & Associates
4489 Byron Center Ave SW Ste B
Wyoming, MI 49519

WORLD MISSION INC
4200 Alpine Ave NW
Comstock Park, MI 49321

Critical Messages

None

Electronic Filing

- Return does not qualify for electronic filing because:
- Signature date is blank on Screen Elf
- Form 8879-EO signature section is incomplete; Signature date, Taxpayer Pin, and ERO PIN are required entries

Informational Messages

- Force field entered with data "1,100.00" on Screen Letter
- Force field entered with data "69,615" on Screen Exp-2
- Force field entered with data "2,228,190" on Screen Bal-2
- Historical Report (990 Return) does not display 2019 column if Tax Projection has not been selected.
- Historical Report (990-T Return) does not display 2019 column if Tax Projection has not been selected.
- Lump sum entry of multiple grant amounts less than or equal to \$5,000 each is indicated; Recipients who've received more than \$5,000 should be listed separately
- Calculated amounts for current year estimated tax payments not applied
- If Schedule B is required, enter data in View > Contributor/Officer > Contributor Information instead of Screen Income
- Form 8868 for Form 990/990-EZ extension previously printed; verify extended due date in Screen Ext
- Form 8868 for Form 990-T extension previously printed; verify extended due date and payment information in Screen Ext
- Verify that any cash contributions from special events reported in the Direct folder that are subject to Schedule B reporting requirements have been entered in View > Contributor/Officer > Contributor Information
- One or more contributor name and address are suppressed on Schedule B
- Enter expense from activities outside of the U.S. on Screen Grants
- Estimate EFTPS method is blank on Screen Letter; ACH Debit or Credit option is used
- 990, Part III total program service revenue does not match 990, Part VIII, line 2g total program service revenue
- Electronic filing for the main return is indicated; Form 990-T must be paper filed
- Preparer 'Mark A Bardolph', Staff 'Brian Bardolph'

Missing Data

	Prior Year Data
Functional Expenses	
<input checked="" type="checkbox"/> Tot / PS, legal fees	8,950
<input checked="" type="checkbox"/> M/G information technology	35
Rent and Royalty Income and Expenses (Muskegon Rental)	
<input checked="" type="checkbox"/> Non-investment Force	11,582
Extensions	
<input checked="" type="checkbox"/> Extension 1 balance due	0
<input checked="" type="checkbox"/> Extension 1 tentative tax	0
Electronic Filing	
<input type="checkbox"/> Signature date	12/17/18
Sale of Capital Assets	
<input checked="" type="checkbox"/> Capital Assets Sales Proceeds	41,199
<input checked="" type="checkbox"/> Capital Gain/(Loss)	41,199

Forms 990 / 990-EZ Return Summary

For calendar year 2018, or tax year beginning **07/01/18** , and ending **06/30/19**

38-3213457

WORLD MISSION INC

Net Asset / Fund Balance at Beginning of Year		<u>2,819,923</u>
Revenue		
Contributions	<u>1,516,637</u>	
Program service revenue	<u>388,351</u>	
Investment income	<u>66</u>	
Capital gain / loss	<u> </u>	
Fundraising / Gaming:		
Gross revenue	<u> </u>	
Direct expenses	<u>35,328</u>	
Net income	<u>-35,328</u>	
Other income	<u>69,940</u>	
Total revenue		<u>1,939,666</u>
Expenses		
Program services	<u>1,933,908</u>	
Management and general	<u>161,022</u>	
Fundraising	<u>197,411</u>	
Total expenses		<u>2,292,341</u>
Excess / (deficit)		<u>-352,675</u>
Changes		<u> </u>
Net Asset / Fund Balance at End of Year		<u>2,467,248</u>

Reconciliation of Revenue

Total revenue per financial statements	<u>1,939,666</u>
Less:	
Unrealized gains	<u> </u>
Donated services	<u> </u>
Recoveries	<u> </u>
Other	<u> </u>
Plus:	
Investment expenses	<u> </u>
Other	<u> </u>
Total revenue per return	<u>1,939,666</u>

Reconciliation of Expenses

Total expenses per financial statements	<u>2,292,341</u>
Less:	
Donated services	<u> </u>
Prior year adjustments	<u> </u>
Losses	<u> </u>
Other	<u> </u>
Plus:	
Investment expenses	<u> </u>
Other	<u> </u>
Total expenses per return	<u>2,292,341</u>

Balance Sheet

	Beginning	Ending	Differences
Assets	<u>4,105,346</u>	<u>3,700,135</u>	
Liabilities	<u>1,285,423</u>	<u>1,232,887</u>	
Net assets	<u>2,819,923</u>	<u>2,467,248</u>	<u>-352,675</u>

Miscellaneous Information

Amended return _____
Return / extended due date 05/15/20
Failure to file penalty _____

Form 990-T Return SummaryFor calendar year 2018, or tax year beginning **07/01/18**, and ending **06/30/19****38-3213457****WORLD MISSION INC**

Income and deductions reflect Form 990-T page 1

Income

Gross profit	<u>0</u>	
Capital gain / loss	<u>0</u>	
All other income	<u>3,030</u>	
Total income		<u>3,030</u>

Deductions

Officer compensation	<u>0</u>	
Salaries	<u>0</u>	
All other deductions		
Total deductions		

Adjustments

Income from additional activities		
Disallowed fringe benefits		
Net operating loss (prior to 2018)		
Specific deduction	<u>1,000</u>	
Total adjustments		<u>(1,000)</u>

Unrelated business taxable income		<u>2,030</u>
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Taxes / Credits / Payments

Regular tax	<u>426</u>	
Other tax: <input type="checkbox"/> Proxy <input type="checkbox"/> AMT <input type="checkbox"/> Facilities		
Tax		<u>426</u>

Foreign tax credit and other credits		
General business credits		
Prior year minimum tax credit		
Total nonrefundable credits		

Other taxes		
Total tax		<u>426</u>

Estimated tax payments and Tax withheld		
Paid with extension	<u>648</u>	
Other credits / payments		
Estimated tax penalty		
Overpayment applied to next year's tax	<u>222</u>	

Payments / penalty / application		<u>426</u>
---	--	------------

Net tax due		<u>0</u>
--------------------	--	----------

Additions to Tax

Interest on late payments		
Failure to file penalty		
Failure to pay penalty		

Total additions		
------------------------	--	--

Balance due		
--------------------	--	--

Refund		
---------------	--	--

Next Year's Estimates

1st quarter	
2nd quarter	
3rd quarter	<u>108</u>
4th quarter	<u>110</u>
Total	<u>218</u>

Miscellaneous Information

Number of Sch M Units	
Amended return	
Return / extended due date	<u>05/15/20</u>

Bardolph & Associates
CERTIFIED PUBLIC ACCOUNTANTS

4489 BYRON CENTER AVE SW - STE B
WYOMING MI 49519
PHONE: (616) 257-3510
FAX: (616) 257-3511

December 3, 2019

CONFIDENTIAL

WORLD MISSION INC
4200 Alpine Ave NW
Comstock Park, MI 49321

Dear Greg:

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)
Exempt Organization Business Income Tax Return (Form 990-T)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

Bardolph & Associates

Bardolph & Associates
CERTIFIED PUBLIC ACCOUNTANTS

4489 BYRON CENTER AVE SW - STE B
WYOMING MI 49519
PHONE: (616) 257-3510
FAX: (616) 257-3511

December 3, 2019

CONFIDENTIAL

WORLD MISSION INC
4200 Alpine Ave NW
Comstock Park, MI 49321

For professional services rendered in connection with the preparation of the following tax forms
for year ending 6/30/19.

Amount due \$ 1,100.00

Filing Instructions

WORLD MISSION INC

Estimated Tax Payments

Taxable Year Ended June 30, 2020

Instructions: Your required 2020 Form 990-T estimated tax payments are as follows:

Due Date	Remittance
10/15/19	\$0
12/16/19	\$0
3/16/20	\$108
6/15/20	\$110

Each payment should be made by a method of Electronic Funds Transfer (EFT). If using the ACH Debit Remittance Method, contact the EFTPS Financial Agent of the U.S. Treasury and direct the Agent to initiate a withdrawal from your account. If using the ACH Credit Remittance Method, contact your financial institution to initiate each tax payment.

Other: Reminders for estimated federal tax installments will not be sent to you. Therefore, you should establish your own reminder system for making timely deposits.

Filing Instructions

WORLD MISSION INC

Exempt Organization Tax Return

Taxable Year Ended June 30, 2019

Date Due: May 15, 2020

Remittance: None is required. Your Form 990 for the tax year ended 6/30/19 shows no balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return electronically. Form 8879-EO, IRS *e-file* Signature Authorization for an Exempt Organization should be signed and dated by an authorized officer of the organization and returned to:

Bardolph & Associates
4489 Byron Center Ave SW Ste B
Wyoming, MI 49519

Important: Your return will not be filed with the IRS until the signed Form 8879-EO has been received by this office.

Other: Your return is being filed electronically with the IRS and is not required to be mailed. If you Mail a paper copy of your return to the IRS it will delay the processing of your return.

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2018, or fiscal year beginning 7/01, 2018, and ending 6/30, 2019

Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879EO for the latest information.

2018

Department of the Treasury
Internal Revenue Service
Name of exempt organization

WORLD MISSION INC

Employer identification number
38-3213457

Name and title of officer
GREG KELLEY
EXEC DIRECT.

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here	<input checked="" type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>1,939,666</u>
2a	Form 990-EZ check here	<input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here	<input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here	<input type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here	<input type="checkbox"/>	b	Balance Due (Form 8868, line 3c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize **BARDOLPH & ASSOCIATES** to enter my PIN **85098** as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature } Date }

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

38726849509

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature } **MARK A BARDOLPH** Date }

ERO Must Retain This Form — See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see back of form.

Form **8879-EO** (2018)

Form **990**

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

OMB No. 1545-0047

2018
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2018 calendar year, or tax year beginning 07/01/18, and ending 06/30/19

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <p style="text-align: center;">WORLD MISSION INC</p> Doing business as WORLD MISSION Number and street (or P.O. box if mail is not delivered to street address) 4200 ALPINE AVE NW City or town, state or province, country, and ZIP or foreign postal code <p style="text-align: center;">COMSTOCK PARK MI 49321</p>	D Employer identification number <p style="text-align: center;">38-3213457</p> E Telephone number <p style="text-align: center;">616-534-5689</p> G Gross receipts \$ 2,665,177
F Name and address of principal officer: <p style="text-align: center;">GREG KELLEY 4200 ALPINE AVE NW COMSTOCK PARK MI 49321</p>		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () <input type="checkbox"/> t (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number u
J Website: u WWW.WORLDMISSION.CC		L Year of formation: 1998
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other u		M State of legal domicile: MI

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <p style="text-align: center;">SEE SCHEDULE O</p>																								
	2 Check this box <input type="checkbox"/> u 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) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12 7b Net unrelated business taxable income from Form 990-T, line 38	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width:5%;">3</td><td style="text-align: right;">11</td></tr> <tr><td>4</td><td style="text-align: right;">9</td></tr> <tr><td>5</td><td style="text-align: right;">64</td></tr> <tr><td>6</td><td style="text-align: right;">10</td></tr> <tr><td>7a</td><td style="text-align: right;">9,212</td></tr> <tr><td>7b</td><td style="text-align: right;">2,030</td></tr> </table>	3	11	4	9	5	64	6	10	7a	9,212	7b	2,030											
3	11																								
4	9																								
5	64																								
6	10																								
7a	9,212																								
7b	2,030																								
Revenue	8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;"></th> <th style="width:45%;">Prior Year</th> <th style="width:45%;">Current Year</th> </tr> </thead> <tbody> <tr><td>8</td><td style="text-align: right;">2,016,354</td><td style="text-align: right;">1,516,637</td></tr> <tr><td>9</td><td style="text-align: right;">195,381</td><td style="text-align: right;">388,351</td></tr> <tr><td>10</td><td style="text-align: right;">104,142</td><td style="text-align: right;">66</td></tr> <tr><td>11</td><td style="text-align: right;">133,684</td><td style="text-align: right;">34,612</td></tr> <tr><td>12</td><td style="text-align: right;">2,449,561</td><td style="text-align: right;">1,939,666</td></tr> </tbody> </table>		Prior Year	Current Year	8	2,016,354	1,516,637	9	195,381	388,351	10	104,142	66	11	133,684	34,612	12	2,449,561	1,939,666					
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9	195,381	388,351																							
10	104,142	66																							
11	133,684	34,612																							
12	2,449,561	1,939,666																							
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) u 197,411 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12	<table border="1" style="width:100%; border-collapse: collapse;"> <tbody> <tr><td>13</td><td style="text-align: right;">1,172,815</td><td style="text-align: right;">1,169,862</td></tr> <tr><td>14</td><td></td><td style="text-align: right;">0</td></tr> <tr><td>15</td><td style="text-align: right;">429,266</td><td style="text-align: right;">379,185</td></tr> <tr><td>16a</td><td></td><td style="text-align: right;">0</td></tr> <tr><td>17</td><td style="text-align: right;">775,677</td><td style="text-align: right;">743,294</td></tr> <tr><td>18</td><td style="text-align: right;">2,377,758</td><td style="text-align: right;">2,292,341</td></tr> <tr><td>19</td><td style="text-align: right;">71,803</td><td style="text-align: right;">-352,675</td></tr> </tbody> </table>	13	1,172,815	1,169,862	14		0	15	429,266	379,185	16a		0	17	775,677	743,294	18	2,377,758	2,292,341	19	71,803	-352,675		
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Net Assets or Fund Balances	20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;"></th> <th style="width:45%;">Beginning of Current Year</th> <th style="width:45%;">End of Year</th> </tr> </thead> <tbody> <tr><td>20</td><td style="text-align: right;">4,105,346</td><td style="text-align: right;">3,700,135</td></tr> <tr><td>21</td><td style="text-align: right;">1,285,423</td><td style="text-align: right;">1,232,887</td></tr> <tr><td>22</td><td style="text-align: right;">2,819,923</td><td style="text-align: right;">2,467,248</td></tr> </tbody> </table>		Beginning of Current Year	End of Year	20	4,105,346	3,700,135	21	1,285,423	1,232,887	22	2,819,923	2,467,248											
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21	1,285,423	1,232,887																							
22	2,819,923	2,467,248																							

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 <p style="text-align: center;">GREG KELLEY</p> Type or print name and title <p style="text-align: center;">EXEC DIRECT.</p>	Date
Paid Preparer Use Only	Print/Type preparer's name MARK A BARDOLPH	Preparer's signature MARK A BARDOLPH
	Date 12/03/19	Check <input type="checkbox"/> if self-employed PTIN P00020447
	Firm's name } BARDOLPH & ASSOCIATES 4489 BYRON CENTER AVE SW STE B Firm's address } WYOMING, MI 49519	Firm's EIN } 38-3411870 Phone no. 616-257-3510

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

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III



1 Briefly describe the organization's mission:

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 organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **1,933,908** including grants of \$ **1,169,862**) (Revenue \$ **166,584**)

THE DISTRIBUTION AND SALE OF AUDIO BIBLES IN VARIOUS LANGUAGES TO UNREACHED PEOPLE THROUGHOUT THE WORLD.

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

N/A

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

N/A

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

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

4e Total program service expenses **u 1,933,908**

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
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	64
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country: u See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1b	Enter the number of voting members included in line 1a, above, who 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 governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **u MI**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **u**
DEBBIE AUSTIN **4200 ALPINE AVE NW**
COMSTOCK PARK **MI 49321** **616-534-5689**

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

Check if Schedule O contains a response or note to any line in this Part VII

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARK YOUNG, SR	0.00									
DIRECTOR	0.00	X					0	0	0	
(2) DAVE DISHAW	0.00									
PRESIDENT	0.00	X		X			0	0	0	
(3) KURT POLL	0.00									
DIRECTOR	0.00	X					0	0	0	
(4) SALLY VANDERPLOEG	0.00									
TREASURER	0.00	X		X			0	0	0	
(5) SCOTT BAKER	0.00									
VICE PRESIDENT	0.00	X		X			0	0	0	
(6) SHERRY HARNEY	0.00									
DIRECTOR	0.00	X					0	0	0	
(7) DAN HIBMA	0.00									
DIRECTOR	0.00	X					0	0	0	
(8) ROGER LUCAS	0.00									
SECRETARY	0.00	X		X			0	0	0	
(9) KEVIN ROOSIEN	0.00									
DIRECTOR	0.00	X					0	0	0	
(10) KEVIN HARNEY	0.00									
DIRECTOR	0.00	X					0	0	0	
(11) JOHN GROOTERS	0.00									
DIRECTOR	0.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) GREG KELLEY	40.00									
EXEC DIRECT.	0.00			X				86,607	0	6,000
1b Sub-total								86,607		6,000
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								86,607		6,000

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

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c 98,818				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 1,417,819				
	g Noncash contributions included in lines 1a-1f: \$	332,827				
	h Total. Add lines 1a-1f	u 1,516,637				
Program Service Revenue	2a HOME SCHOOL BUILDING RENTAL	Busn. Code	218,750	218,750		
	b THE TREASURE SALES		160,584	160,584		
	c ROYALTIES - WM CLOTHING		6,000	6,000		
	d MISCELLANEOUS		3,017	3,017		
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f	u 388,351				
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	u 66			66
4 Income from investment of tax-exempt bond proceeds		u				
5 Royalties		u				
6a Gross rents		(i) Real	45,603			
		(ii) Personal				
		b Less: rental exps.	36,391			
c Rental inc. or (loss)		9,212				
d Net rental income or (loss)		u 9,212			9,212	
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 \$ 98,818 of contributions reported on line 1c). See Part IV, line 18		a				
		b Less: direct expenses	35,328			
	c Net income or (loss) from fundraising events	u -35,328				
9a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses					
	c Net income or (loss) from gaming activities	u				
10a Gross sales of inventory, less returns and allowances	a 714,520					
	b Less: cost of goods sold	653,792				
	c Net income or (loss) from sales of inventory	u 60,728			60,728	
11a Miscellaneous Revenue	Busn. Code					
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d	u				
12 Total revenue. See instructions.	u 1,939,666	388,351	9,212	60,794		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	252,305	252,305		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	59,082	59,082		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	858,475	858,475		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	320,224	128,089	96,068	96,067
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	40,871	16,349	12,261	12,261
10 Payroll taxes	18,090	7,236	5,427	5,427
11 Fees for services (non-employees):				
a Management				
b Legal	7,251		7,251	
c Accounting	35,969	27,355	8,614	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	18,178	18,178		
12 Advertising and promotion	69,138	42,428		26,710
13 Office expenses	10,264	6,582	26	3,656
14 Information technology	34,707	18,345		16,362
15 Royalties	34,231	34,231		
16 Occupancy	35,977	11,992	11,992	11,993
17 Travel	17,302	11,778	57	5,467
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	49,226	49,226		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	105,323	93,039	910	11,374
23 Insurance	30,933	20,724	10,209	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PURCHASES & SUPPLIES	86,657	86,657		
b TRAVEL FOR PARTNERS	72,584	72,584		
c UTILITIES	56,282	50,252	3,015	3,015
d TRUCK & VEHICLE EXPENSE	32,189	25,528	3,142	3,519
e All other expenses	47,083	43,473	2,050	1,560
25 Total functional expenses. Add lines 1 through 24e	2,292,341	1,933,908	161,022	197,411
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	449,248	1	400,884
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	24,716	4	14,216
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	206,585	8	109,957
	9	Prepaid expenses and deferred charges	37,780	9	19,759
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 5,345,880		
	b	Less: accumulated depreciation	10b 2,598,461	10c 2,859,995	2,747,419
	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	527,022	15	407,900
16	Total assets. Add lines 1 through 15 (must equal line 34)	4,105,346	16	3,700,135	
Liabilities	17	Accounts payable and accrued expenses	75,962	17	75,569
	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	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	1,209,461	23	1,157,318
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,285,423	26	1,232,887
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	2,340,790	27	2,228,190
	28	Temporarily restricted net assets	479,133	28	239,058
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), 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	2,819,923	33	2,467,248	
34	Total liabilities and net assets/fund balances	4,105,346	34	3,700,135	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,939,666
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,292,341
3	Revenue less expenses. Subtract line 2 from line 1	3	-352,675
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,819,923
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,467,248

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	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.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

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

2018

Department of the Treasury
Internal Revenue Service

u Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

u Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

WORLD MISSION INC

Employer identification number

38-3213457

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 12, 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 (Form 990 or 990-EZ).)
- 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,323,196	2,190,561	2,302,309	2,016,354	1,516,637	9,349,057
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	1,323,196	2,190,561	2,302,309	2,016,354	1,516,637	9,349,057
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						9,349,057

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	1,323,196	2,190,561	2,302,309	2,016,354	1,516,637	9,349,057
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	278	27	8	56	66	435
9 Net income from unrelated business activities, whether or not the business is regularly carried on			14,591	2,100	3,948	20,639
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)					714,520	714,520
11 Total support. Add lines 7 through 10						10,084,651

12 Gross receipts from related activities, etc. (see instructions) 12 1,056,521

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**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	92.71 %
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	90.55 %

16a 33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2018. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2017. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,323,196	2,190,561	2,302,309	2,016,354	1,516,637	9,349,057
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	50,067	518,513	138,476	188,881	160,584	1,056,521
3 Gross receipts from activities that are not an unrelated trade or business under section 513	1,974,419	1,881,308	1,487,481	904,268	714,520	6,961,996
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	3,347,682	4,590,382	3,928,266	3,109,503	2,391,741	17,367,574
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	202,902	921,468	742,547	274,394	154,713	2,296,024
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	149,663	150,646	421,890	542,580	590,823	1,855,602
c Add lines 7a and 7b	352,565	1,072,114	1,164,437	816,974	745,536	4,151,626
8 Public support. (Subtract line 7c from line 6.)						13,215,948

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6	3,347,682	4,590,382	3,928,266	3,109,503	2,391,741	17,367,574
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	278	27	8	56	66	435
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975				935	1,604	2,539
c Add lines 10a and 10b	278	27	8	991	1,670	2,974
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on			14,591	2,100	3,948	20,639
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	3,347,960	4,590,409	3,942,865	3,112,594	2,397,359	17,391,187
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 2018 (line 8, column (f), divided by line 13, column (f))	15	75.99 %
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	80.31 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	1 %

- 19a 33 1/3% support tests—2018.** 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—2017.** 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 Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations *(continued)*

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	<i>Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).</i>		
a	<input type="checkbox"/> The organization satisfied the Activities Test. <i>Complete line 2 below.</i>		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>		
c	<input type="checkbox"/> The organization supported a governmental entity. <i>Describe in Part VI how you supported a government entity (see instructions).</i>		
2	Activities Test. <i>Answer (a) and (b) below.</i>		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Table with 2 columns: Section D - Distributions, Current Year. Rows 1-10 detailing amounts paid to supported organizations, administrative expenses, and total annual distributions.

Table with 4 columns: Section E - Distribution Allocations (see instructions), (i) Excess Distributions, (ii) Underdistributions Pre-2018, (iii) Distributable Amount for 2018. Rows 1-8 detailing distribution allocations and carryovers.

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

u Attach to Form 990, Form 990-EZ, or Form 990-PF.
u Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Name of the organization

Employer identification number

WORLD MISSION INC

38-3213457

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

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

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

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ► \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

WORLD MISSION INC

Employer identification number

38-3213457

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 258,418	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 285,800	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 55,750	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 60,377	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 30,525	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 80,200	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

WORLD MISSION INC

Employer identification number

38-3213457

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	GIFT OF BIBLE UNITS	\$ 252,399	
4	RENT	\$ 38,428	
		\$	
		\$	
		\$	
		\$	
		\$	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

u Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization

Employer identification number

WORLD MISSION INC

38-3213457

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on 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 value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors... Yes No, 6 Did the organization inform all grantees... Yes No.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements, 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution, 3 Number of conservation easements modified, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy..., 6 Staff and volunteer hours..., 7 Amount of expenses..., 8 Does each conservation easement..., 9 In Part XIII, describe how the organization reports...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report..., 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report..., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain...

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 XIII.

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" on 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 XIII and complete the following table:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Yes No

Part V Endowment Funds.

Complete if the organization answered "Yes" on 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 current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment **u**
 - b** Permanent endowment **u**
 - c** Temporarily restricted endowment **u**
- The percentages on lines 2a, 2b, and 2c should equal 100%.

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

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		511,519		511,519
b Buildings		4,381,797	2,165,493	2,216,304
c Leasehold improvements		48,111	48,111	
d Equipment		310,166	299,649	10,517
e Other		94,287	85,208	9,079
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)		u		2,747,419

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) u		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) u		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) GOODWILL	352,514
(2) CONTRIBUTIONS RECEIVABLE	55,386
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) u	407,900

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) u	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

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

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

u Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

WORLD MISSION INC

Employer identification number

38-3213457

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal					
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	DISTRIBUTION OF BIBL			19,278	BIBLES	FMV
(2)			AFRICA	DISTRIBUTION OF BIBL			12,963	BIBLES	FMV
(3)			AFRICA	DISTRIBUTION OF BIBL			27,511	BIBLES	FMV
(4)			SUB-SAHARAN AFRICA	DISTRIBUTION OF BIBL			40,057	BIBLES	FMV
(5)			AFRICA	BIBLE DISTRIBUTION			21,883	BIBLES	FMV
(6)			SOUTH ASIA	DISTRIBUTION OF BIBL			137,595	BIBLES	FMV
(7)			SOUTH ASIA	DISTRIBUTE BIBLES			24,801	BIBLES	FMV
(8)			AFRICA	DISTRIBUTION OF BIBL			15,860	BIBLES	FMV
(9)			SUB-SAHARAN AFRICA	DISTRIBUTION OF BIBL			101,685	BIBLES	FMV
(10)			MIDDLE EAST	DISTRIBUTION OF BIBL			8,858	BIBLES	FMV
(11)			SOUTH ASIA	DISTRIBUTION OF BIBL			12,942	BIBLES	FMV
(12)			ASIA	DISTRIBUTION OF BIBL			8,337	BIBLES	FMV
(13)			SOUTH ASIA	DISTRIBUTION OF BIBL			19,758	BIBLES	FMV
(14)			SOUTH ASIA	DISTRIBUTION OF BIBL			17,236	BIBLES	FMV
(15)			SUB-SAHARAN AFRICA	DISTRIBUTION OF BIBL			77,155	BIBLES	FMV
(16)			ASIA	DISTRIBUTION OF BIBL			8,545	BIBLES	FMV

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **u** _____

3 Enter total number of other organizations or entities **u** _____

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			ASIA	DISTRIBUTION OF BIBL			21,154	BIBLES	FMV
(2)			SUB-SAHARAN AFRICA	DISTRIBUTION OF BIBL			23,155	BIBLES	FMV
(3)			SUB-SAHARAN AFRICA	MISSION WORK	8,000	WIRE			
(4)			SUB-SAHARAN AFRICA	WELL DRILLING	15,440	WIRE			
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **u** _____

3 Enter total number of other organizations or entities **u** _____

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) REFUGEE/DISASTER/BIBLES	SOUTH ASIA	1	9,500	WIRE			
(2) REFUGEE/DISASTER/BIBLES	SUB-SAHARAN AFRICA	1	19,000	WIRE			
(3) PARTNER TRAINING	SUB-SAHARAN AFRICA	1	25,175	WIRE			
(4) WATER/WELLS/BIBLES	SOUTH ASIA	1	18,644	WIRE			
(5) BIBLES/TRAINING/WELLS	ASIA	1	5,300	WIRE			
(6) WELLS/WATER	SOUTH ASIA	1	5,500	WIRE			
(7) BIBLE DISTRIBUTION	SUB-SAHARAN AFRICA	1	7,550	WIRE			
(8) BIBLES & DISASTER RELIEF	SOUTH EAST ASIA	1	23,000	WIRE			
(9) BIBLES & HUMANITARIAN	SOUTH ASIA	1	14,471	WIRE			
(10) BIBLES & TRAINING	SOUTH ASIA	1	5,806	WIRE			
(11) BIBLES & DISASTER RELIEF	SOUTH ASIA	1	5,205	WIRE			
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2** Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No
- 3** Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)* Yes No
- 4** Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No
- 5** Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6** Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

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

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

THE ORGANIZATION HAS TWO MAIN TYPES OF ASSISTANCE SENT TO FOREIGN COUNTRIES. THE FIRST IS DISTRIBUTING BIBLES (AUDIO BIBLES) THROUGHOUT THE WORLD. THIS ACTIVITY IS TRACKED ON A PER UNIT BASIS. THE FAIR MARKET VALUE OF THE UNITS IS TRACKED AT COST PLUS THE COST OF SHIPPING THE BIBLES. IN ADDITION TO THIS THE ORGANIZATION ALSO SEEKS TO ADDRESS OTHER NEEDS OF INDIVIDUALS. THIS IS PRIMARILY DONE THROUGH WELL DRILLING TO PROVIDE WATER. THESE FUNDS ARE DISTRIBUTED, PRIMARILY VIA WIRES TO PARTNERS AND PARTNER ORGANIZATIONS WORKING ABROAD. THIS ACTIVITY IS MONITORED AND VISTS TO OBVSERVE THE WORK BEING PERFORMED OCCUR AS NEEDED.

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

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2018

Department of the Treasury
Internal Revenue Service

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

⚡ Attach to Form 990 or Form 990-EZ.

⚡ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Name of the organization

WORLD MISSION INC

Employer identification number

38-3213457

Part I Fundraising Activities. Complete if the organization answered "Yes" on 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 10 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 and address 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			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total							

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

.....

.....

.....

.....

.....

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>FALL DINNER</u>	_____	<u>NONE</u>	(add col. (a) through col. (c))
		(event type)	(event type)	(total number)	(col. (c))
Revenue	1 Gross receipts	98,818			98,818
	2 Less: Contributions	98,818			98,818
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	35,328			35,328
	10 Direct expense summary. Add lines 4 through 9 in column (d)				35,328
11 Net income summary. Subtract line 10 from line 3, column (d)				-35,328	

Part III Gaming. Complete if the organization answered "Yes" on 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. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
 a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

u Attach to Form 990.

u Go to www.irs.gov/Form990 for the latest information.

Name of the organization

WORLD MISSION INC

Employer identification number

38-3213457

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	HSB, INC. 5625 BURLINGAME WYOMING MI 49509	80-0144094	501C3		218,750	FMV	RENT	
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

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

SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

u Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

u Attach to Form 990 or Form 990-EZ.

u Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

WORLD MISSION INC

Employer identification number

38-3213457

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

- 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 u \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization u \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the org.?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												

Total u \$ _____

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2018

**Open To Public
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U Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
U Attach to Form 990.
U Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization

WORLD MISSION INC

Employer identification number

38-3213457

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		30,000	FMV
6 Cars and other vehicles				
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				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other u (BIBLES)	X	1	252,399	FMV
26 Other u (RENT)	X	2	50,428	FMV
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 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't 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 nonstandard 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 didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

u Attach to Form 990 or 990-EZ.

u Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018**Open to Public
Inspection**

Name of the organization

WORLD MISSION INC

Employer identification number

38-3213457**FORM 990 - ORGANIZATION'S MISSION**

WORLD MISSION IS A CHRISTIAN NONPROFIT ORGANIZATION FOCUSING ON THE DISTRIBUTION OF AUDIO BIBLES (THE TREASURE) TO ORAL LEARNERS THROUGHOUT THE WORLD. WE ARE MOST INTERESTED IN REACHING THE PEOPLE GROUPS THAT ARE STILL CONSIDERED UNREACHED. THESE GROUPS HAVE LESS THAN 2% OF THEIR POPULATION IDENTIFIED AS CHRISTIANS AND ARE HIGHLY ILLITERATE. WE ARE ACCOMPLISHING THIS GOAL THROUGH A NETWORK OF PRAYER SUPPORT AND FUNDING FROM INDIVIDUALS, ORGANIZATIONS, WORLD MISSION THRIFT STORES, AND RECYCLING PROJECTS.

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS

ROGER LUCAS

DAN HIBMA

FAMILY & BUSINESS RELATIONSHIP

SHERRY HARNEY

KEVIN HARNEY

FAMILY RELATIONSHIP**FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990**

PRIOR TO THE FILING OF FORM 990 THE FORM IS REVIEWED BY THE BOARD FOR COMMENT AND APPROVAL.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

BOARD MEMBERS ARE PERIODICALLY REQUIRED TO COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE WHEREBY THEY MUST DISCLOSE OWNERSHIP OF FINANCIAL INTERESTS, LOANS, AND OTHER INVOLVEMENT WITH ENTITIES WITH WHOM THE ORGANIZATION HAS A

Name of the organization

Employer identification number

WORLD MISSION INC

38-3213457

RELATIONSHIP.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
 COMPENSATION OF THE CEO AND EXECUTIVE DIRECTOR ARE SUBJECT TO THE
 ORGANIZATION'S COMPENSATION POLICY WHICH REQUIRES THAT EITHER THE BOARD OR
 A BOARD-APPOINTED COMPENSATION COMMITTEE MEET WITH THE INDIVIDUAL AND ALSO
 REVIEW ALL PERTINENT INFORMATION, INCLUDING A REVIEW OF COMPENSATION PAID
 BY COMPARABLE ORGANIZATIONS FOR COMPARABLE SERVICES, IN MAKING A DECISION
 ON COMPENSATION. ALL COMPENSATION DECISIONS REQUIRE A VOTE OF THE BOARD
 AND ALL COMPENSATION RELATED DISCUSSIONS ARE DOCUMENTED IN CONTEMPORANEOUS
 MINUTES.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
 DECISIONS REGARDING COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES ARE
 SUBJECT TO THE SAME PROCESS AS DESCRIBED ABOVE FOR THE CEO AND EXECUTIVE
 DIRECTOR.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
 FINANCIAL STATEMENTS AND OTHER GOVERNING DOCUMENTS REQUIRED TO BE DISCLOSED
 TO THE PUBLIC ARE AVAILABLE UPON REQUEST.

Filing Instructions

WORLD MISSION INC

Exempt Organization Business Tax Return

Taxable Year Ended June 30, 2019

Date Due: May 15, 2020

Remittance: None is required. Your Form 990-T for the tax year ended 6/30/19 shows a total overpayment of \$222, all of which is to be credited to your estimated tax liability for the coming year.

Mail To: Department of the Treasury
Internal Revenue Service Center
Ogden, UT 84201-0027

If a private delivery service is used, mail to:
OSPC
1973 Rulon White Blvd.
Ogden, UT 84201-1000

Signature: The return should be signed and dated on Page 2 by an officer representing the organization.

Form **990-T**

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0687

2018

Department of the Treasury
Internal Revenue Service

For calendar year 2018 or other tax year beginning **07/01/18**, and ending **06/30/19**

Go to www.irs.gov/Form990T for instructions and the latest information.

Open to Public Inspection for 501(c)(3) Organizations Only

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

<p>A <input type="checkbox"/> Check box if address changed</p> <p>B Exempt under section</p> <p><input checked="" type="checkbox"/> 501(C) (3)</p> <p><input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e)</p> <p><input type="checkbox"/> 408A <input type="checkbox"/> 530(a)</p> <p><input type="checkbox"/> 529(a)</p> <p>C Book value of all assets at end of year 3,700,135</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.)</p> <p>Print WORLD MISSION INC</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. Type 4200 ALPINE AVE NW</p> <p>City or town, state or province, country, and ZIP or foreign postal code COMSTOCK PARK MI 49321</p>	<p>D Employer identification number (Employees' trust, see instructions.) 38-3213457</p> <p>E Unrelated business activity code (See instructions.) 532000</p>
<p>F Group exemption number (See instructions.) u</p> <p>G Check organization type u <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust</p>		

H Enter the number of the organization's unrelated trades or businesses. **u** 1 Describe the only (or first) unrelated trade or business here
u RENTAL OF EQUIPMENT. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? **u** Yes No
If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of **u** **DEBBIE AUSTIN** Telephone number **u** **616-534-5689**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances			
	c Balance u			
2	Cost of goods sold (Schedule A, line 7)			
3	Gross profit. Subtract line 2 from line 1c			
4a	Capital gain net income (attach Schedule D)			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			
c	Capital loss deduction for trusts			
5	Income (loss) from partnership and S corporation (attach statement)			
6	Rent income (Schedule C)			
7	Unrelated debt-financed income (Schedule E)	14,999	11,969	3,030
8	Interest, annuities, royalties, and rents from controlled organization (Schedule F)			
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			
10	Exploited exempt activity income (Schedule I)			
11	Advertising income (Schedule J)			
12	Other income (See instructions; attach schedule)			
13	Total. Combine lines 3 through 12	14,999	11,969	3,030

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)				
14	Compensation of officers, directors, and trustees (Schedule K)			
15	Salaries and wages			
16	Repairs and maintenance			
17	Bad debts			
18	Interest (attach schedule) (see instructions)			
19	Taxes and licenses			
20	Charitable contributions (See instructions for limitation rules)			
21	Depreciation (attach Form 4562)	21	25,037	
22	Less depreciation claimed on Schedule A and elsewhere on return	22a	25,037	22b
23	Depletion			
24	Contributions to deferred compensation plans			
25	Employee benefit programs			
26	Excess exempt expenses (Schedule I)			
27	Excess readership costs (Schedule J)			
28	Other deductions (attach schedule)			
29	Total deductions. Add lines 14 through 28			
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13			3,030
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)			
32	Unrelated business taxable income. Subtract line 31 from line 30			3,030

Part III Total Unrelated Business Taxable income

33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	3,030
34	Amounts paid for disallowed fringes	34	
35	Deductions for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34	36	3,030
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36	38	2,030

Part IV Tax Computation

39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	426
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	40	
41	Proxy tax. See instructions	41	
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income. See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	426

Part V Tax and Payments

45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a	
b	Other credits (see instructions)	45b	
c	General business credit. Attach Form 3800 (see instructions)	45c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d	
e	Total credits. Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	426
47	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (att. sch.)	47	
48	Total tax. Add lines 46 and 47 (see instructions)	48	426
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k) line 2	49	
50a	Payments: A 2017 overpayment credited to 2018	50a	
b	2018 estimated tax payments	50b	
c	Tax deposited with Form 8868	50c	648
d	Foreign organizations: Tax paid or withheld at source (see instructions)	50d	
e	Backup withholding (see instructions)	50e	
f	Credit for small employer health insurance premiums (attach Form 8941)	50f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total u	50g	
51	Total payments. Add lines 50a through 50g	51	648
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached u <input type="checkbox"/>	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed u	53	0
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid u	54	222
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax u 222 Refunded u	55	

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "YES," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "YES," enter the name of the foreign country here u	Yes	No
			X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "YES," see instructions for other forms the organization may have to file.		X
58	Enter the amount of tax-exempt interest received or accrued during the tax year u \$		

Sign Here **u** _____ **u EXEC DIRECT.** _____
 Signature of officer Date Title

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 taxpayer) is based on all information of which preparer has any knowledge.

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

Paid Preparer Use Only	Print/Type preparer's name MARK A BARDOLPH	Preparer's signature MARK A BARDOLPH	Date 12/03/19	Check <input type="checkbox"/> if self-employed	PTIN P00020447
	Firm's name } BARDOLPH & ASSOCIATES	Firm's EIN } 38-3411870			
	Firm's address } 4489 BYRON CENTER AVE SW STE B WYOMING, MI 49519	Phone no. 616-257-3510			

Schedule A – Cost of Goods Sold. Enter method of inventory valuation **u**

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 Cost of goods sold. Subtract		
3 Cost of labor	3		line 6 from line 5. Enter here and		
4a Additional sec. 263A costs			in Part I, line 2	7	
(attach schedule)	4a				
b Other costs			8 Do the rules of section 263A (with respect to		Yes
(attach schedule)	4b		property produced or acquired for resale) apply		No
5 Total. Add lines 1 through 4b	5		to the organization?		

Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1) N/A
(2)
(3)
(4)

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	Total	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) u

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) **u**

Schedule E – Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
		STMT 1 (a) Straight line depreciation (attach schedule)	STMT 2 (b) Other deductions (attach schedule)
(1) MUSKEGON RENTAL	45,603	25,037	11,354
(2)			
(3)			
(4)			
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)
(1) 196,609	597,687	32.89 %	14,999
(2)		%	
(3)		%	
(4)		%	
SEE STATEMENT 3		SEE STATEMENT 4	
Totals		Enter here and on page 1, Part I, line 7, column (A). 14,999	Enter here and on page 1, Part I, line 7, column (B). 11,969
Total dividends-received deductions included in column 8 u		u	

Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1) N/A					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
Totals			u	u

Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col.4)
(1) N/A				
(2)				
(3)				
(4)				
Totals		u		

Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						
Totals		u				

Schedule J – Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5)) ...		u				

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						
Totals from Part I u						
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5) u						

Schedule K – Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1) N/A		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			u

Statement 1 - Form 990-T, Schedule E, Column 3a - Straight Line Depreciation

<u>Description</u>	<u>Deduction</u>
MUSKEGON RENTAL	
MUSKEGON VALUELAND STORE	21,796
MUSKEGON STORE ADDITION	20
2 CONTAINERS	935
CASH REGISTER	37
FLOOR SCALE	97
NEW ROOF	1,580
SIGN	572
TOTAL	<u>25,037</u>

Statement 2 - Form 990-T, Schedule E, Column 3b - Other Deductions

<u>Description</u>	<u>Deduction</u>
MUSKEGON RENTAL	
INTEREST	10,005
INSURANCE	1,349
TOTAL	<u>11,354</u>

Statement 3 - Form 990-T, Schedule E, Column 4 - Average Acquisition Debt

<u>Description</u>	<u>Deduction</u>
MUSKEGON RENTAL	
SUM OF DEBT OUTSTANDING AT FIRST OF EACH MONTH	2,359,302
DIVIDED BY TOTAL NUMBER OF MONTHS PROPERTY HELD	12
AVERAGE ACQUISITION DEBT	<u>196,609</u>

Statement 4 - Form 990-T, Schedule E, Column 5 - Average Adjusted Basis

<u>Description</u>	<u>Deduction</u>
MUSKEGON RENTAL	
ADJUSTED BASIS ON FIRST DAY PROPERTY WAS HELD	609,129
ADJUSTED BASIS ON LAST DAY PROPERTY WAS HELD	586,245
	1,195,374
DIVIDED BY 2	2
AVERAGE ADJUSTED BASIS	<u>597,687</u>

Form **4562**
 Department of the Treasury
 Internal Revenue Service (99)
 Name(s) shown on return

Depreciation and Amortization
 (Including Information on Listed Property)
 Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172
2018
 Attachment Sequence No. **179**

WORLD MISSION INC

Identifying number
38-3213457

Business or activity to which this form relates

INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

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

1	Maximum amount (see instructions)	1	1,000,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,500,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2017 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	69,239

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2018	17	383
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input checked="" type="checkbox"/>		

Section B—Assets Placed in Service During 2018 Tax Year Using the General Depreciation System

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

Section C—Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	69,622
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562**
 Department of the Treasury
 Internal Revenue Service (99)
 Name(s) shown on return

Depreciation and Amortization
 (Including Information on Listed Property)
 Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172
2018
 Attachment Sequence No. **179**

WORLD MISSION INC

Identifying number
38-3213457

Business or activity to which this form relates

MUSKEGON RENTAL

Part I Election To Expense Certain Property Under Section 179

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

1	Maximum amount (see instructions)	1	1,000,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,500,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2017 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	25,037

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2018	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input checked="" type="checkbox"/>		

Section B—Assets Placed in Service During 2018 Tax Year Using the General Depreciation System

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

Section C—Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	25,037
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562**
 Department of the Treasury
 Internal Revenue Service (99)
 Name(s) shown on return

Depreciation and Amortization
 (Including Information on Listed Property)

u Attach to your tax return.

u Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2018

Attachment Sequence No. **179**

WORLD MISSION INC

Identifying number
38-3213457

Business or activity to which this form relates

HSB RENTAL

Part I Election To Expense Certain Property Under Section 179

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

1	Maximum amount (see instructions)	1	1,000,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,500,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2017 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	35,708

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2018	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input checked="" type="checkbox"/>		

Section B—Assets Placed in Service During 2018 Tax Year Using the General Depreciation System

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

Section C—Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year		30 yrs.	MM	S/L	
d	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	35,708
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2018)

THERE ARE NO AMOUNTS FOR PAGE 2

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Federal Asset Report

Page 1

FYE: 6/30/2019

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
Prior MACRS:											
235	Electical upgrade	8/25/96	3,847				3,847	25	HY S/L	1,683	77
236	TRX 400M pa25d 240v fixtue	8/26/96	15,297				15,297	25	HY S/L	6,692	306
			<u>19,144</u>				<u>19,144</u>			<u>8,375</u>	<u>383</u>
Other Depreciation:											
5	Radios	4/29/04	11,533				11,533	10	MO S/L	11,533	0
95	Forklift	6/09/98	14,090				14,090	10	MO S/L	14,090	0
112	2000 ISUZU	4/25/95	19,500				19,500	7	MO S/L	19,500	0
143	New Display	1/29/99	1,164				1,164	5	MO S/L	1,164	0
158	Carpet	7/31/90	4,820				4,820	5	MO S/L	4,820	0
159	Asphalt	7/31/90	4,549				4,549	10	MO S/L	4,549	0
160	Building	7/31/90	279,057				279,057	40	MO S/L	195,847	6,977
161	Building - Contribution from Land	7/31/90	131,000				131,000	40	MO S/L	91,427	3,275
165	Building	8/31/90	1,785				1,785	40	MO S/L	1,242	45
167	Building	9/30/90	1,147				1,147	40	MO S/L	796	29
168	Building	9/30/90	1,564				1,564	40	MO S/L	1,085	39
171	Forklift	1/31/91	5,000				5,000	5	MO S/L	5,000	0
173	Back Wall	6/30/91	1,076				1,076	40	MO S/L	727	26
174	Air Conditioning	9/30/91	13,080				13,080	10	MO S/L	13,080	0
179	Stands/Shelving	11/30/92	2,339				2,339	5	MO S/L	2,339	0
181	Display Case/Shelves	12/31/92	900				900	5	MO S/L	900	0
201	Freight for Racks	4/06/95	378				378	7	MO S/L	378	0
202	Racks	4/25/95	1,722				1,722	7	MO S/L	1,722	0
203	(10) '17" White Hanger	5/11/95	190				190	3	MO S/L	190	0
204	(100) '17" White Hanger	5/22/95	1,895				1,895	3	MO S/L	1,895	0
207	Building Improvement	6/30/95	19,235				19,235	40	MO S/L	11,060	481
209	Shelving	10/05/95	2,680				2,680	7	MO S/L	2,680	0
210	Freight for Above	10/11/95	1,960				1,960	7	MO S/L	1,960	0
211	Shelving	10/12/95	5,340				5,340	7	MO S/L	5,340	0
212	Racks	10/24/95	16,735				16,735	7	MO S/L	16,735	0
213	Freight for Above	10/24/95	1,770				1,770	7	MO S/L	1,770	0
215	Telephone System	10/31/95	1,940				1,940	5	MO S/L	1,940	0
216	Racks	10/31/95	2,067				2,067	7	MO S/L	2,067	0
218	Shopping Carts	11/01/95	2,878				2,878	7	MO S/L	2,878	0
219	Unload Store Fixtures	11/13/95	182				182	5	MO S/L	182	0
220	4 Mile Road Store	11/15/95	882,388				882,388	40	MO S/L	500,020	22,060
221	Equipment	11/15/95	1,835				1,835	5	MO S/L	1,835	0
225	Racks	11/30/95	3,556				3,556	7	MO S/L	3,556	0
227	Freight	12/31/95	623				623	7	MO S/L	623	0
229	Drainage Easement	1/31/96	834				834	40	MO S/L	467	21
230	Drawings as-built	1/31/96	175				175	40	MO S/L	98	5
232	Racks	2/20/96	418				418	7	MO S/L	418	0
234	100KVA Transformer	6/27/96	2,076				2,076	40	MO S/L	1,142	51
238	Komatsu Forklift Truck	9/09/97	13,200				13,200	7	MO S/L	13,200	0
241	Yard King Mobile Yard Ramp	11/29/97	10,195				10,195	7	MO S/L	10,195	0
245	Signage	6/12/98	2,875				2,875	5	MO S/L	2,875	0
246	Letters for New Sign	8/21/98	716				716	7	MO S/L	716	0
247	Sprinkler Upgrade	10/23/98	1,800				1,800	10	MO S/L	1,800	0
249	Electrical Upgrade	2/19/99	769				769	10	MO S/L	769	0
258	Upgrade Computer	9/20/99	415				415	5	MO S/L	415	0
277	Repair Burl Building	8/31/99	5,501				5,501	20	MO S/L	5,180	275
346	Playground Equipment	3/14/03	8,269				8,269	10	MO S/L	8,269	0
358	Mavri-Sanyo 1700 Projector	5/29/03	1,547				1,547	5	MO S/L	1,547	0
360	Hoogerhyde Safe	12/03/02	530				530	7	MO S/L	530	0
366	Playground improv.	9/30/03	850				850	10	MO S/L	850	0
388	Carpet and Lumber	1/24/05	420				420	5	MO S/L	420	0
389	Portastudio	5/25/05	301				301	3	MO S/L	301	0
408	Burlingame store improvements	5/31/05	14,562				14,562	7	MO S/L	14,562	0
415	Office Furniture conference	12/26/06	843				843	7	MO S/L	843	0
423	Roofing	12/12/06	1,834				1,834	10	MO S/L	1,834	0
427	Shelving	4/07/07	606				606	7	MO S/L	606	0
437	Grandville store leasehold improvements	10/31/07	45,771				45,771	5	MO S/L	45,771	0
438	Pad printer	3/28/08	1,055				1,055	5	MO S/L	1,055	0
442	Carpet 4 mile	3/01/08	13,078				13,078	5	MO S/L	13,078	0
457	2008 Ford E350	7/01/08	30,000				30,000	7	MO S/L	30,000	0
460	Recycle Bins	6/04/09	3,255				3,255	5	MO S/L	3,255	0
461	Carpet Analyzer	3/03/09	17,500				17,500	10	MO S/L	16,333	1,167

-*3457

Federal Asset Report

Page 2

FYE: 6/30/2019

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
468	Office Furniture in New Location	10/09/09	1,150				1,150	10	MO S/L	1,006	115
472	Security Camera	6/29/10	318				318	5	MO S/L	318	0
476	Secutiry Camera	6/29/10	318				318	5	MO S/L	318	0
480	Security Camera	10/29/10	318				318	5	MO S/L	318	0
491	Drop Boxes	12/31/11	33,124				33,124	7	MO S/L	30,758	2,366
496	Steel Door	7/25/11	1,295				1,295	10	MO S/L	896	129
500	Grocery Carts	4/29/12	1,903				1,903	3	MO S/L	1,903	0
501	New Seal on Roof	5/03/12	7,000				7,000	10	MO S/L	4,317	700
502	Steel Bookcase	4/30/12	980				980	10	MO S/L	604	98
506	Attila MAC Computer	6/30/12	1,059				1,059	3	MO S/L	1,059	0
507	Storage Shed for Burlingame	2/01/13	1,093				1,093	5	MO S/L	1,093	0
508	Hangers	9/28/12	1,103				1,103	2	MO S/L	1,103	0
511	Hangers	9/28/12	1,103				1,103	2	MO S/L	1,103	0
512	Hangers	9/28/12	384				384	2	MO S/L	384	0
514	Container	1/28/13	3,475				3,475	3	MO S/L	3,475	0
519	Camera, Lens	11/06/12	1,689				1,689	5	MO S/L	1,689	0
520	Computer and Monitor Greg	5/10/13	984				984	3	MO S/L	984	0
521	Wall System for back office	6/06/13	3,738				3,738	7	MO S/L	2,714	534
522	Sound Mixer	6/19/13	210				210	2	MO S/L	210	0
523	Overhead Door	4/25/13	3,279				3,279	10	MO S/L	1,694	328
524	Container	5/31/13	3,225				3,225	7	MO S/L	2,342	461
525	Racks and Beams for Back Room	4/17/13	1,915				1,915	10	MO S/L	989	192
526	3 Containers	6/13/13	9,675				9,675	7	MO S/L	7,026	1,382
530	Atilla's Computer	8/28/13	620				620	5	MO S/L	599	21
531	Edge of Dock and Transition Plate	1/20/14	2,340				2,340	1	MO S/L	2,340	0
533	Fred's Donated Truck	2/02/14	7,500				7,500	5	MO S/L	6,625	875
534	Cash Register	9/23/13	700				700	5	MO S/L	665	35
537	Cash Register	8/29/13	1,400				1,400	5	MO S/L	1,353	47
538	Cap for Pallet Truck	7/24/13	584				584	5	MO S/L	574	10
539	Drop Boxes	8/27/13	419				419	2	MO S/L	419	0
540	Cash Register	7/12/13	1,400				1,400	5	MO S/L	1,400	0
541	2 Containers	7/02/13	6,450				6,450	7	MO S/L	4,607	922
542	Steel Cage	7/09/13	150				150	2	MO S/L	150	0
543	Floor Scale	12/31/13	964				964	5	MO S/L	867	97
544	Floor Scale	12/31/13	964				964	5	MO S/L	867	97
547	Cash Register	9/13/13	250				250	5	MO S/L	242	8
548	New door for break room	12/17/18	662				662	10	MO S/L	0	33
549	Cash Register	9/13/13	700				700	5	MO S/L	677	23
550	Computer (Kathy)	10/04/18	621				621	3	MO S/L	0	155
551	Battery for hilo	8/26/13	5,683				5,683	5	MO S/L	4,547	1,136
553	Spiral Wishing Well	2/08/15	750				750	5	MO S/L	513	150
554	Computer Development Director	4/29/15	495				495	5	MO S/L	314	99
555	Computer Change Your World Director	4/29/15	400				400	5	MO S/L	253	80
556	Drop Boxes	7/08/15	1,800				1,800	3	MO S/L	1,800	0
558	Hand Truck	12/09/15	139				139	2	MO S/L	139	0
559	Hand Truck	12/09/15	207				207	2	MO S/L	207	0
560	Scale and Ramp	3/25/16	2,790				2,790	5	MO S/L	1,255	558
561	Equipment Board Room	4/28/16	932				932	5	MO S/L	404	186
562	TV and Router for Conference Room	4/15/16	785				785	5	MO S/L	353	158
563	Box Truck	12/16/15	10,737				10,737	5	MO S/L	5,368	2,148
564	Sprinter Van	12/09/15	12,000				12,000	7	MO S/L	4,429	1,714
565	Land Apline Office	12/16/15	10,000				10,000	0	-- Land	0	0
566	Building Apline Office	12/16/15	499,063				499,063	40	MO S/L	31,191	12,477
567	Computers (Feeding the Hungry)	12/16/15	3,400				3,400	5	MO S/L	1,700	680
568	Software (Feeding the Hungry)	12/16/15	510				510	2	MO S/L	510	0
571	Freezer (Feeding the Hungry)	12/16/15	3,203				3,203	7	MO S/L	1,144	458
572	Freezer (Feeding the Hungry)	12/16/15	1,931				1,931	7	MO S/L	690	275
573	Pallet Jack, Carts (Feeding the Hungry)	12/16/15	4,693				4,693	5	MO S/L	2,347	938
574	Sign for Burlingame	4/30/16	1,560				1,560	7	MO S/L	483	223
575	Parking Lot Asphalt	4/30/16	10,000				10,000	10	MO S/L	2,167	1,000
576	Office Redo	6/30/16	15,000				15,000	40	MO S/L	750	375
578	Lettering for Truck	4/30/16	1,350				1,350	3	MO S/L	975	375
581	Alpine Office Building	8/19/16	27,280				27,280	40	MO S/L	1,250	682
582	Roof Replacement	5/19/17	4,999				4,999	20	MO S/L	271	250
585	Debbie's office	4/10/18	3,911				3,911	40	MO S/L	24	98
586	Pallet Jack	1/11/18	559				559	5	MO S/L	56	112
587	Computer Kris	9/05/17	590				590	3	MO S/L	164	197
588	Computer Matt	10/28/17	515				515	3	MO S/L	114	172
589	Quickbooks	5/29/18	800				800	3	MO S/L	22	267
590	2 Air conditioning units	8/21/18	9,997				9,997	10	MO S/L	0	833
591	Computer (Liberty)	12/03/18	775				775	3	MO S/L	0	151

Federal Asset Report

FYE: 6/30/2019

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
592	Computer (Greg)	11/28/18	780		780	3 MO S/L	0	152
593	5x10 trailer with ramp	4/23/19	1,338		1,338	7 MO S/L	0	32
594	Podcasting Equipment	4/01/19	2,982		2,982	5 MO S/L	0	149
595	Computer for Greg	5/08/19	630		630	3 MO S/L	0	35
	Total Other Depreciation		<u>2,367,019</u>		<u>2,367,019</u>		<u>1,252,587</u>	<u>69,239</u>
	Total ACRS and Other Depreciation		<u>2,367,019</u>		<u>2,367,019</u>		<u>1,252,587</u>	<u>69,239</u>
	Grand Totals		2,386,163		2,386,163		1,260,962	69,622
	Less: Dispositions and Transfers		0		0		0	0
	Less: Start-up/Org Expense		0		0		0	0
	Net Grand Totals		<u>2,386,163</u>		<u>2,386,163</u>		<u>1,260,962</u>	<u>69,622</u>

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Federal Asset Report

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Muskegon Rental

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Other Depreciation:									
10	Hangers	7/20/95	6,072			6,072	3 MO S/L	6,072	0
11	Racks	7/20/95	625			625	7 MO S/L	625	0
12	Shopping Carts	9/08/95	3,619			3,619	7 MO S/L	3,619	0
15	Safe	2/20/96	590			590	5 MO S/L	590	0
49	Racks	3/15/95	6,939			6,939	7 MO S/L	6,939	0
50	Racks	7/15/95	13,009			13,009	7 MO S/L	13,009	0
51	Racks	7/17/95	3,615			3,615	7 MO S/L	3,615	0
52	Sign	7/27/95	5,006			5,006	10 MO S/L	5,006	0
53	Pallet Truck	7/28/95	430			430	5 MO S/L	430	0
54	Fire Extinguishers	8/04/95	457			457	5 MO S/L	457	0
56	Racks	8/15/95	4,316			4,316	7 MO S/L	4,316	0
57	Sign	7/20/95	995			995	10 MO S/L	995	0
393	Hoogerhyde safe	10/22/04	675			675	5 MO S/L	675	0
410	Muskegon Valueland Store	5/01/06	871,825			871,825	40 MO S/L	265,180	21,796
421	Muskegon Store Addition	7/21/06	794			794	40 MO S/L	237	20
471	Security Camera	6/29/10	318			318	5 MO S/L	318	0
509	Hangers	9/28/12	1,103			1,103	2 MO S/L	1,103	0
528	2 Containers	6/13/13	6,550			6,550	7 MO S/L	4,757	935
535	Cash Register	8/29/13	1,100			1,100	5 MO S/L	1,063	37
546	Floor Scale	12/31/13	964			964	5 MO S/L	867	97
583	New Roof	9/26/16	31,600			31,600	20 MO S/L	2,765	1,580
584	Sign	11/07/16	4,000			4,000	7 MO S/L	952	572
Total Other Depreciation			<u>964,602</u>			<u>964,602</u>		<u>323,590</u>	<u>25,037</u>
Total ACRS and Other Depreciation			<u>964,602</u>			<u>964,602</u>		<u>323,590</u>	<u>25,037</u>
Grand Totals			964,602			964,602		323,590	25,037
Less: Dispositions and Transfers			0			0		0	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>964,602</u>			<u>964,602</u>		<u>323,590</u>	<u>25,037</u>

Federal Asset Report

FYE: 6/30/2019

HSB Rental

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Other Depreciation:									
251	Irrigation System	9/14/99	6,762			6,762	10 MO S/L	6,762	0
252	Chain Link Fence	8/06/99	4,899			4,899	10 MO S/L	4,899	0
253	Parking Lot Lighting	1/22/00	1,474			1,474	10 MO S/L	1,474	0
279	Carpet/Vinyl	12/31/98	49,581			49,581	7 MO S/L	49,581	0
281	Building	12/31/98	1,187,558			1,187,558	40 MO S/L	578,935	29,689
282	Building	7/01/99	32,470			32,470	10 MO S/L	32,470	0
283	Sport Court	9/01/00	77,575			77,575	10 MO S/L	77,575	0
284	Basketball Baskets	9/29/00	23,600			23,600	10 MO S/L	23,600	0
285	Scoreboard	9/29/00	4,646			4,646	10 MO S/L	4,646	0
286	Bookstore Renovation	9/30/00	2,446			2,446	20 MO S/L	2,171	123
287	Bookstore Plumbing	10/13/00	948			948	20 MO S/L	841	48
288	Bookstore Renovation	11/30/00	12,610			12,610	20 MO S/L	11,086	631
289	Painting	2/17/01	2,890			2,890	5 MO S/L	2,890	0
290	Install Lighting	3/30/01	5,800			5,800	20 MO S/L	5,003	290
298	Carpet	10/27/00	6,886			6,886	7 MO S/L	6,886	0
323	Gym Addition-Home School	8/31/01	1,473			1,473	10 MO S/L	1,473	0
324	Paint Gym-Home School	11/06/01	2,700			2,700	10 MO S/L	2,700	0
325	Facility Improvement-HSB	1/10/02	1,070			1,070	10 MO S/L	1,070	0
326	Building Corner Gaurds-HSB	3/14/02	978			978	10 MO S/L	978	0
363	Double doors for gym	12/01/02	1,125			1,125	10 MO S/L	1,125	0
364	gym floor volleyball court	2/27/04	2,090			2,090	40 MO S/L	749	52
398	New bookstore	11/01/04	73,137			73,137	15 MO S/L	66,636	4,875
Total Other Depreciation			<u>1,502,718</u>			<u>1,502,718</u>		<u>883,550</u>	<u>35,708</u>
Total ACRS and Other Depreciation			<u>1,502,718</u>			<u>1,502,718</u>		<u>883,550</u>	<u>35,708</u>
Grand Totals			1,502,718			1,502,718		883,550	35,708
Less: Dispositions and Transfers			0			0		0	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>1,502,718</u>			<u>1,502,718</u>		<u>883,550</u>	<u>35,708</u>

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MI Asset Report

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Asset	Description	Date In Service	Cost	Basis for Depr	MI Prior	MI Current	Federal Current	Difference Fed - MI
Other Depreciation:								
5	Radios	4/29/04	0	0	0	0	0	0
95	Forklift	6/09/98	0	0	0	0	0	0
112	2000 ISUZU	4/25/95	0	0	0	0	0	0
143	New Display	1/29/99	0	0	0	0	0	0
158	Carpet	7/31/90	0	0	0	0	0	0
159	Asphalt	7/31/90	0	0	0	0	0	0
160	Building	7/31/90	0	0	0	0	6,977	6,977
161	Building - Contribution from Land	7/31/90	0	0	0	0	3,275	3,275
165	Building	8/31/90	0	0	0	0	45	45
167	Building	9/30/90	0	0	0	0	29	29
168	Building	9/30/90	0	0	0	0	39	39
171	Forklift	1/31/91	0	0	0	0	0	0
173	Back Wall	6/30/91	0	0	0	0	26	26
174	Air Conditioning	9/30/91	0	0	0	0	0	0
179	Stands/Shelving	11/30/92	0	0	0	0	0	0
181	Display Case/Shelves	12/31/92	0	0	0	0	0	0
201	Freight for Racks	4/06/95	0	0	0	0	0	0
202	Racks	4/25/95	0	0	0	0	0	0
203	(10) '17" White Hanger	5/11/95	0	0	0	0	0	0
204	(100) '17" White Hanger	5/22/95	0	0	0	0	0	0
207	Building Improvement	6/30/95	0	0	0	0	481	481
209	Shelving	10/05/95	0	0	0	0	0	0
210	Freight for Above	10/11/95	0	0	0	0	0	0
211	Shelving	10/12/95	0	0	0	0	0	0
212	Racks	10/24/95	0	0	0	0	0	0
213	Freight for Above	10/24/95	0	0	0	0	0	0
215	Telephone System	10/31/95	0	0	0	0	0	0
216	Racks	10/31/95	0	0	0	0	0	0
218	Shopping Carts	11/01/95	0	0	0	0	0	0
219	Unload Store Fixtures	11/13/95	0	0	0	0	0	0
220	4 Mile Road Store	11/15/95	0	0	0	0	22,060	22,060
221	Equipment	11/15/95	0	0	0	0	0	0
225	Racks	11/30/95	0	0	0	0	0	0
227	Freight	12/31/95	0	0	0	0	0	0
229	Drainage Easement	1/31/96	0	0	0	0	21	21
230	Drawings as-built	1/31/96	0	0	0	0	5	5
232	Racks	2/20/96	0	0	0	0	0	0
234	100KVA Transformer	6/27/96	0	0	0	0	51	51
235	Electical upgrade	8/25/96	0	0	0	0	77	77
236	TRX 400M pa25d 240v fixtue	8/26/96	0	0	0	0	306	306
238	Komatsu Forklift Truck	9/09/97	0	0	0	0	0	0
241	Yard King Mobile Yard Ramp	11/29/97	0	0	0	0	0	0
245	Signage	6/12/98	0	0	0	0	0	0
246	Letters for New Sign	8/21/98	0	0	0	0	0	0
247	Sprinkler Upgrade	10/23/98	0	0	0	0	0	0
249	Electrical Upgrade	2/19/99	0	0	0	0	0	0
258	Upgrade Computer	9/20/99	0	0	0	0	0	0
277	Repair Burl Building	8/31/99	0	0	0	0	275	275
346	Playground Equipment	3/14/03	0	0	0	0	0	0
358	Mavri-Sanyo 1700 Projector	5/29/03	0	0	0	0	0	0
360	Hoogerhyde Safe	12/03/02	0	0	0	0	0	0
366	Playground improv.	9/30/03	0	0	0	0	0	0
388	Carpet and Lumber	1/24/05	0	0	0	0	0	0
389	Portastudio	5/25/05	0	0	0	0	0	0
408	Burlingame store improvements	5/31/05	0	0	0	0	0	0
415	Office Furniture conference	12/26/06	0	0	0	0	0	0
423	Roofing	12/12/06	0	0	0	0	0	0
427	Shelving	4/07/07	0	0	0	0	0	0
437	Grandville store leasehold improvements	10/31/07	0	0	0	0	0	0
438	Pad printer	3/28/08	0	0	0	0	0	0
442	Carpet 4 mile	3/01/08	0	0	0	0	0	0
457	2008 Ford E350	7/01/08	30,000	30,000	30,000	0	0	0
460	Recycle Bins	6/04/09	0	0	0	0	0	0
461	Carpet Analyzer	3/03/09	0	0	0	0	1,167	1,167
468	Office Furniture in New Location	10/09/09	0	0	0	0	115	115
472	Security Camera	6/29/10	0	0	0	0	0	0
476	Secutiry Camera	6/29/10	0	0	0	0	0	0
480	Security Camera	10/29/10	0	0	0	0	0	0

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MI Asset Report

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Asset	Description	Date In Service	Cost	Basis for Depr	MI Prior	MI Current	Federal Current	Difference Fed - MI
491	Drop Boxes	12/31/11	0	0	0	0	2,366	2,366
496	Steel Door	7/25/11	0	0	0	0	129	129
500	Grocery Carts	4/29/12	0	0	0	0	0	0
501	New Seal on Roof	5/03/12	0	0	0	0	700	700
502	Steel Bookcase	4/30/12	0	0	0	0	98	98
506	Attila MAC Computer	6/30/12	0	0	0	0	0	0
507	Storage Shed for Burlingame	2/01/13	0	0	0	0	0	0
508	Hangers	9/28/12	1,103	1,103	1,103	0	0	0
511	Hangers	9/28/12	1,103	1,103	1,103	0	0	0
512	Hangers	9/28/12	384	384	384	0	0	0
514	Container	1/28/13	3,475	3,475	3,475	0	0	0
519	Camera, Lens	11/06/12	0	0	0	0	0	0
520	Computer and Monitor Greg	5/10/13	0	0	0	0	0	0
521	Wall System for back office	6/06/13	0	0	0	0	534	534
522	Sound Mixer	6/19/13	0	0	0	0	0	0
523	Overhead Door	4/25/13	0	0	0	0	328	328
524	Container	5/31/13	0	0	0	0	461	461
525	Racks and Beams for Back Room	4/17/13	0	0	0	0	192	192
526	3 Containers	6/13/13	0	0	0	0	1,382	1,382
530	Atilla's Computer	8/28/13	620	620	599	21	21	0
531	Edge of Dock and Transition Plate	1/20/14	2,340	2,340	2,340	0	0	0
533	Fred's Donated Truck	2/02/14	7,500	7,500	6,625	875	875	0
534	Cash Register	9/23/13	700	700	665	35	35	0
537	Cash Register	8/29/13	1,400	1,400	1,353	47	47	0
538	Cap for Pallet Truck	7/24/13	584	584	574	10	10	0
539	Drop Boxes	8/27/13	419	419	419	0	0	0
540	Cash Register	7/12/13	1,400	1,400	1,400	0	0	0
541	2 Containers	7/02/13	6,450	6,450	4,607	922	922	0
542	Steel Cage	7/09/13	150	150	150	0	0	0
543	Floor Scale	12/31/13	964	964	867	97	97	0
544	Floor Scale	12/31/13	964	964	867	97	97	0
547	Cash Register	9/13/13	250	250	242	8	8	0
548	New door for break room	12/17/18	662	662	0	33	33	0
549	Cash Register	9/13/13	700	700	677	23	23	0
550	Computer (Kathy)	10/04/18	621	621	0	155	155	0
551	Battery for hilo	8/26/13	5,683	5,683	5,494	189	1,136	947
553	Spiral Wishing Well	2/08/15	750	750	513	150	150	0
554	Computer Development Director	4/29/15	495	495	314	99	99	0
555	Computer Change Your World Director	4/29/15	400	400	253	80	80	0
556	Drop Boxes	7/08/15	1,800	1,800	1,800	0	0	0
558	Hand Truck	12/09/15	139	139	139	0	0	0
559	Hand Truck	12/09/15	207	207	207	0	0	0
560	Scale and Ramp	3/25/16	2,790	2,790	1,255	558	558	0
561	Equipment Board Room	4/28/16	932	932	404	186	186	0
562	TV and Router for Conference Room	4/15/16	785	785	353	158	158	0
563	Box Truck	12/16/15	10,737	10,737	5,368	2,148	2,148	0
564	Sprinter Van	12/09/15	12,000	12,000	4,429	1,714	1,714	0
565	Land Apline Office	12/16/15	10,000	10,000	0	0	0	0
566	Building Apline Office	12/16/15	499,063	499,063	31,191	12,477	12,477	0
567	Computers (Feeding the Hungry)	12/16/15	3,400	3,400	1,700	680	680	0
568	Software (Feeding the Hungry)	12/16/15	510	510	510	0	0	0
571	Freezer (Feeding the Hungry)	12/16/15	3,203	3,203	1,144	458	458	0
572	Freezer (Feeding the Hungry)	12/16/15	1,931	1,931	690	275	275	0
573	Pallet Jack, Carts (Feeding the Hungry)	12/16/15	4,693	4,693	2,347	938	938	0
574	Sign for Burlingame	4/30/16	1,560	1,560	483	223	223	0
575	Parking Lot Asphalt	4/30/16	10,000	10,000	2,167	1,000	1,000	0
576	Office Redo	6/30/16	15,000	15,000	750	375	375	0
578	Lettering for Truck	4/30/16	1,350	1,350	975	375	375	0
581	Alpine Office Building	8/19/16	27,280	27,280	1,250	682	682	0
582	Roof Replacement	5/19/17	4,999	4,999	271	250	250	0
585	Debbie's office	4/10/18	3,911	3,911	24	98	98	0
586	Pallet Jack	1/11/18	559	559	56	112	112	0
587	Computer Kris	9/05/17	590	590	164	197	197	0
588	Computer Matt	10/28/17	515	515	114	172	172	0
589	Quickbooks	5/29/18	800	800	22	267	267	0
590	2 Air conditioning units	8/21/18	9,997	9,997	0	833	833	0
591	Computer (Liberty)	12/03/18	775	775	0	151	151	0
592	Computer (Greg)	11/28/18	780	780	0	152	152	0
593	5x10 trailer with ramp	4/23/19	1,338	1,338	0	32	32	0
594	Podcasting Equipment	4/01/19	2,982	2,982	0	149	149	0
595	Computer for Greg	5/08/19	630	630	0	35	35	0

MI Asset Report

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Asset	Description	Date In Service	Cost	Basis for Depr	MI Prior	MI Current	Federal Current	Difference Fed - MI
	Total Other Depreciation		<u>704,373</u>	<u>704,373</u>	<u>121,837</u>	<u>27,536</u>	<u>69,622</u>	<u>42,086</u>
	Total ACRS and Other Depreciation		<u>704,373</u>	<u>704,373</u>	<u>121,837</u>	<u>27,536</u>	<u>69,622</u>	<u>42,086</u>
	Grand Totals		704,373	704,373	121,837	27,536	69,622	42,086
	Less: Dispositions		0	0	0	0	0	0
	Less: Start-up/Org Expense		0	0	0	0	0	0
	Net Grand Totals		<u>704,373</u>	<u>704,373</u>	<u>121,837</u>	<u>27,536</u>	<u>69,622</u>	<u>42,086</u>

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Muskegon Rental

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FYE: 6/30/2019

Asset	Description	Date In Service	Cost	Basis for Depr	MI Prior	MI Current	Federal Current	Difference Fed - MI
Other Depreciation:								
10	Hangers	7/20/95	0	0	0	0	0	0
11	Racks	7/20/95	0	0	0	0	0	0
12	Shopping Carts	9/08/95	0	0	0	0	0	0
15	Safe	2/20/96	0	0	0	0	0	0
49	Racks	3/15/95	0	0	0	0	0	0
50	Racks	7/15/95	0	0	0	0	0	0
51	Racks	7/17/95	0	0	0	0	0	0
52	Sign	7/27/95	0	0	0	0	0	0
53	Pallet Truck	7/28/95	0	0	0	0	0	0
54	Fire Extinguishers	8/04/95	0	0	0	0	0	0
56	Racks	8/15/95	0	0	0	0	0	0
57	Sign	7/20/95	0	0	0	0	0	0
393	Hoogerhyde safe	10/22/04	0	0	0	0	0	0
410	Muskegon Valueland Store	5/01/06	0	0	0	0	21,796	21,796
421	Muskegon Store Addition	7/21/06	0	0	0	0	20	20
471	Security Camera	6/29/10	0	0	0	0	0	0
509	Hangers	9/28/12	1,103	1,103	1,103	0	0	0
528	2 Containers	6/13/13	0	0	0	0	935	935
535	Cash Register	8/29/13	1,100	1,100	1,063	37	37	0
546	Floor Scale	12/31/13	964	964	867	97	97	0
583	New Roof	9/26/16	31,600	31,600	2,765	1,580	1,580	0
584	Sign	11/07/16	4,000	4,000	952	572	572	0
Total Other Depreciation			<u>38,767</u>	<u>38,767</u>	<u>6,750</u>	<u>2,286</u>	<u>25,037</u>	<u>22,751</u>
Total ACRS and Other Depreciation			<u>38,767</u>	<u>38,767</u>	<u>6,750</u>	<u>2,286</u>	<u>25,037</u>	<u>22,751</u>
Grand Totals			38,767	38,767	6,750	2,286	25,037	22,751
Less: Dispositions			0	0	0	0	0	0
Less: Start-up/Org Expense			0	0	0	0	0	0
Net Grand Totals			<u>38,767</u>	<u>38,767</u>	<u>6,750</u>	<u>2,286</u>	<u>25,037</u>	<u>22,751</u>

MI Asset Report

FYE: 6/30/2019

HSB Rental

Asset	Description	Date In Service	Cost	Basis for Depr	MI Prior	MI Current	Federal Current	Difference Fed - MI
Other Depreciation:								
251	Irrigation System	9/14/99	0	0	0	0	0	0
252	Chain Link Fence	8/06/99	0	0	0	0	0	0
253	Parking Lot Lighting	1/22/00	0	0	0	0	0	0
279	Carpet/Vinyl	12/31/98	0	0	0	0	0	0
281	Building	12/31/98	0	0	0	0	29,689	29,689
282	Building	7/01/99	0	0	0	0	0	0
283	Sport Court	9/01/00	0	0	0	0	0	0
284	Basketball Baskets	9/29/00	0	0	0	0	0	0
285	Scoreboard	9/29/00	0	0	0	0	0	0
286	Bookstore Renovation	9/30/00	0	0	0	0	123	123
287	Bookstore Plumbing	10/13/00	0	0	0	0	48	48
288	Bookstore Renovation	11/30/00	0	0	0	0	631	631
289	Painting	2/17/01	0	0	0	0	0	0
290	Install Lighting	3/30/01	0	0	0	0	290	290
298	Carpet	10/27/00	0	0	0	0	0	0
323	Gym Addition-Home School	8/31/01	0	0	0	0	0	0
324	Paint Gym-Home School	11/06/01	0	0	0	0	0	0
325	Facility Improvement-HSB	1/10/02	0	0	0	0	0	0
326	Building Corner Gaurds-HSB	3/14/02	0	0	0	0	0	0
363	Double doors for gym	12/01/02	0	0	0	0	0	0
364	gym floor volleyball court	2/27/04	0	0	0	0	52	52
398	New bookstore	11/01/04	0	0	0	0	4,875	4,875
Total Other Depreciation			<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>35,708</u>	<u>35,708</u>
Total ACRS and Other Depreciation			<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>35,708</u>	<u>35,708</u>
Grand Totals			0	0	0	0	35,708	35,708
Less: Dispositions			0	0	0	0	0	0
Less: Start-up/Org Expense			<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Net Grand Totals			<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>35,708</u>	<u>35,708</u>

Depreciation Adjustment Report

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
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There are no assets that meet the criteria of this report

Asset	Description	Date In Service	Cost	Tax	AMT
Prior MACRS:					
235	Electical upgrade	8/25/96	3,847	77	0
236	TRX 400M pa25d 240v fixtue	8/26/96	15,297	306	0
			<u>19,144</u>	<u>383</u>	<u>0</u>
Other Depreciation:					
5	Radios	4/29/04	11,533	0	0
95	Forklift	6/09/98	14,090	0	0
112	2000 ISUZU	4/25/95	19,500	0	0
143	New Display	1/29/99	1,164	0	0
158	Carpet	7/31/90	4,820	0	0
159	Asphalt	7/31/90	4,549	0	0
160	Building	7/31/90	279,057	6,976	0
161	Building - Contribution from Land	7/31/90	131,000	3,275	0
165	Building	8/31/90	1,785	44	0
167	Building	9/30/90	1,147	28	0
168	Building	9/30/90	1,564	39	0
171	Forklift	1/31/91	5,000	0	0
173	Back Wall	6/30/91	1,076	27	0
174	Air Conditioning	9/30/91	13,080	0	0
179	Stands/Shelving	11/30/92	2,339	0	0
181	Display Case/Shelves	12/31/92	900	0	0
201	Freight for Racks	4/06/95	378	0	0
202	Racks	4/25/95	1,722	0	0
203	(10) '17" White Hanger	5/11/95	190	0	0
204	(100) '17" White Hanger	5/22/95	1,895	0	0
207	Building Improvement	6/30/95	19,235	481	0
209	Shelving	10/05/95	2,680	0	0
210	Freight for Above	10/11/95	1,960	0	0
211	Shelving	10/12/95	5,340	0	0
212	Racks	10/24/95	16,735	0	0
213	Freight for Above	10/24/95	1,770	0	0
215	Telephone System	10/31/95	1,940	0	0
216	Racks	10/31/95	2,067	0	0
218	Shopping Carts	11/01/95	2,878	0	0
219	Unload Store Fixtures	11/13/95	182	0	0
220	4 Mile Road Store	11/15/95	882,388	22,059	0
221	Equipment	11/15/95	1,835	0	0
225	Racks	11/30/95	3,556	0	0
227	Freight	12/31/95	623	0	0
229	Drainage Easement	1/31/96	834	21	0
230	Drawings as-built	1/31/96	175	4	0
232	Racks	2/20/96	418	0	0
234	100KVA Transformer	6/27/96	2,076	52	0
238	Komatsu Forklift Truck	9/09/97	13,200	0	0
241	Yard King Mobile Yard Ramp	11/29/97	10,195	0	0
245	Signage	6/12/98	2,875	0	0
246	Letters for New Sign	8/21/98	716	0	0
247	Sprinkler Upgrade	10/23/98	1,800	0	0
249	Electrical Upgrade	2/19/99	769	0	0
258	Upgrade Computer	9/20/99	415	0	0
277	Repair Burl Building	8/31/99	5,501	46	0
346	Playground Equipment	3/14/03	8,269	0	0
358	Mavri-Sanyo 1700 Projector	5/29/03	1,547	0	0
360	Hoogerhyde Safe	12/03/02	530	0	0
366	Playground improv.	9/30/03	850	0	0
388	Carpet and Lumber	1/24/05	420	0	0
389	Portastudio	5/25/05	301	0	0
408	Burlingame store improvements	5/31/05	14,562	0	0
415	Office Furniture conference	12/26/06	843	0	0
423	Roofing	12/12/06	1,834	0	0
427	Shelving	4/07/07	606	0	0
437	Grandville store leasehold improvements	10/31/07	45,771	0	0
438	Pad printer	3/28/08	1,055	0	0
442	Carpet 4 mile	3/01/08	13,078	0	0

Asset	Description	Date In Service	Cost	Tax	AMT
457	2008 Ford E350	7/01/08	30,000	0	0
460	Recycle Bins	6/04/09	3,255	0	0
461	Carpet Analyzer	3/03/09	17,500	0	0
468	Office Furniture in New Location	10/09/09	1,150	29	0
472	Security Camera	6/29/10	318	0	0
476	Secutiry Camera	6/29/10	318	0	0
480	Security Camera	10/29/10	318	0	0
491	Drop Boxes	12/31/11	33,124	0	0
496	Steel Door	7/25/11	1,295	130	0
500	Grocery Carts	4/29/12	1,903	0	0
501	New Seal on Roof	5/03/12	7,000	700	0
502	Steel Bookcase	4/30/12	980	98	0
506	Attila MAC Computer	6/30/12	1,059	0	0
507	Storage Shed for Burlingame	2/01/13	1,093	0	0
508	Hangers	9/28/12	1,103	0	0
511	Hangers	9/28/12	1,103	0	0
512	Hangers	9/28/12	384	0	0
514	Container	1/28/13	3,475	0	0
519	Camera, Lens	11/06/12	1,689	0	0
520	Computer and Monitor Greg	5/10/13	984	0	0
521	Wall System for back office	6/06/13	3,738	490	0
522	Sound Mixer	6/19/13	210	0	0
523	Overhead Door	4/25/13	3,279	328	0
524	Container	5/31/13	3,225	422	0
525	Racks and Beams for Back Room	4/17/13	1,915	191	0
526	3 Containers	6/13/13	9,675	1,267	0
530	Atilla's Computer	8/28/13	620	0	0
531	Edge of Dock and Transition Plate	1/20/14	2,340	0	0
533	Fred's Donated Truck	2/02/14	7,500	0	0
534	Cash Register	9/23/13	700	0	0
537	Cash Register	8/29/13	1,400	0	0
538	Cap for Pallet Truck	7/24/13	584	0	0
539	Drop Boxes	8/27/13	419	0	0
540	Cash Register	7/12/13	1,400	0	0
541	2 Containers	7/02/13	6,450	921	0
542	Steel Cage	7/09/13	150	0	0
543	Floor Scale	12/31/13	964	0	0
544	Floor Scale	12/31/13	964	0	0
547	Cash Register	9/13/13	250	0	0
548	New door for break room	12/17/18	662	66	0
549	Cash Register	9/13/13	700	0	0
550	Computer (Kathy)	10/04/18	621	207	0
551	Battery for hilo	8/26/13	5,683	0	0
553	Spiral Wishing Well	2/08/15	750	87	0
554	Computer Development Director	4/29/15	495	82	0
555	Computer Change Your World Director	4/29/15	400	67	0
556	Drop Boxes	7/08/15	1,800	0	0
558	Hand Truck	12/09/15	139	0	0
559	Hand Truck	12/09/15	207	0	0
560	Scale and Ramp	3/25/16	2,790	558	0
561	Equipment Board Room	4/28/16	932	187	0
562	TV and Router for Conference Room	4/15/16	785	157	0
563	Box Truck	12/16/15	10,737	2,147	0
564	Sprinter Van	12/09/15	12,000	1,714	0
565	Land Apline Office	12/16/15	10,000	0	0
566	Building Apline Office	12/16/15	499,063	12,477	0
567	Computers (Feeding the Hungry)	12/16/15	3,400	680	0
568	Software (Feeding the Hungry)	12/16/15	510	0	0
571	Freezer (Feeding the Hungry)	12/16/15	3,203	457	0
572	Freezer (Feeding the Hungry)	12/16/15	1,931	276	0
573	Pallet Jeck, Carts (Feeding the Hungry)	12/16/15	4,693	939	0
574	Sign for Burlingame	4/30/16	1,560	223	0
575	Parking Lot Asphalt	4/30/16	10,000	1,000	0
576	Office Redo	6/30/16	15,000	375	0
578	Lettering for Truck	4/30/16	1,350	0	0
581	Alpine Office Building	8/19/16	27,280	682	0
582	Roof Replacement	5/19/17	4,999	250	0
585	Debbie's office	4/10/18	3,911	98	0
586	Pallet Jack	1/11/18	559	112	0
587	Computer Kris	9/05/17	590	196	0
588	Computer Matt	10/28/17	515	172	0

Asset	Description	Date In Service	Cost	Tax	AMT
589	Quickbooks	5/29/18	800	267	0
590	2 Air conditioning units	8/21/18	9,997	1,000	0
591	Computer (Liberty)	12/03/18	775	258	0
592	Computer (Greg)	11/28/18	780	260	0
593	5x10 trailer with ramp	4/23/19	1,338	191	0
594	Podcasting Equipment	4/01/19	2,982	596	0
595	Computer for Greg	5/08/19	630	210	0
Total Other Depreciation			<u>2,367,019</u>	<u>63,619</u>	<u>0</u>
Total ACRS and Other Depreciation			<u>2,367,019</u>	<u>63,619</u>	<u>0</u>
Grand Totals			<u>2,386,163</u>	<u>64,002</u>	<u>0</u>

Asset	Description	Date In Service	Cost	Tax	AMT
Other Depreciation:					
10	Hangers	7/20/95	6,072	0	0
11	Racks	7/20/95	625	0	0
12	Shopping Carts	9/08/95	3,619	0	0
15	Safe	2/20/96	590	0	0
49	Racks	3/15/95	6,939	0	0
50	Racks	7/15/95	13,009	0	0
51	Racks	7/17/95	3,615	0	0
52	Sign	7/27/95	5,006	0	0
53	Pallet Truck	7/28/95	430	0	0
54	Fire Extinguishers	8/04/95	457	0	0
56	Racks	8/15/95	4,316	0	0
57	Sign	7/20/95	995	0	0
393	Hoogerhyde safe	10/22/04	675	0	0
410	Muskegon Valueland Store	5/01/06	871,825	21,796	0
421	Muskegon Store Addition	7/21/06	794	19	0
471	Security Camera	6/29/10	318	0	0
509	Hangers	9/28/12	1,103	0	0
528	2 Containers	6/13/13	6,550	858	0
535	Cash Register	8/29/13	1,100	0	0
546	Floor Scale	12/31/13	964	0	0
583	New Roof	9/26/16	31,600	1,580	0
584	Sign	11/07/16	4,000	571	0
	Total Other Depreciation		<u>964,602</u>	<u>24,824</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>964,602</u>	<u>24,824</u>	<u>0</u>
	Grand Totals		<u>964,602</u>	<u>24,824</u>	<u>0</u>

Asset	Description	Date In Service	Cost	Tax	AMT
Other Depreciation:					
251	Irrigation System	9/14/99	6,762	0	0
252	Chain Link Fence	8/06/99	4,899	0	0
253	Parking Lot Lighting	1/22/00	1,474	0	0
279	Carpet/Vinyl	12/31/98	49,581	0	0
281	Building	12/31/98	1,187,558	29,689	0
282	Building	7/01/99	32,470	0	0
283	Sport Court	9/01/00	77,575	0	0
284	Basketball Baskets	9/29/00	23,600	0	0
285	Scoreboard	9/29/00	4,646	0	0
286	Bookstore Renovation	9/30/00	2,446	122	0
287	Bookstore Plumbing	10/13/00	948	47	0
288	Bookstore Renovation	11/30/00	12,610	630	0
289	Painting	2/17/01	2,890	0	0
290	Install Lighting	3/30/01	5,800	290	0
298	Carpet	10/27/00	6,886	0	0
323	Gym Addition-Home School	8/31/01	1,473	0	0
324	Paint Gym-Home School	11/06/01	2,700	0	0
325	Facility Improvement-HSB	1/10/02	1,070	0	0
326	Building Corner Gaurds-HSB	3/14/02	978	0	0
363	Double doors for gym	12/01/02	1,125	0	0
364	gym floor volleyball court	2/27/04	2,090	53	0
398	New bookstore	11/01/04	73,137	1,626	0
	Total Other Depreciation		<u>1,502,718</u>	<u>32,457</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>1,502,718</u>	<u>32,457</u>	<u>0</u>
	Grand Totals		<u>1,502,718</u>	<u>32,457</u>	<u>0</u>

-*3457

MI Future Depreciation Report**FYE: 6/30/20**

Page 1

FYE: 6/30/2019

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>MI</u>
<u>Prior MACRS:</u>				
235	Electical upgrade	8/25/96	0	0
236	TRX 400M pa25d 240v fixtue	8/26/96	0	0
			<u>0</u>	<u>0</u>
			<u>0</u>	<u>0</u>
<u>Other Depreciation:</u>				
5	Radios	4/29/04	0	0
95	Forklift	6/09/98	0	0
112	2000 ISUZU	4/25/95	0	0
143	New Display	1/29/99	0	0
158	Carpet	7/31/90	0	0
159	Asphalt	7/31/90	0	0
160	Building	7/31/90	0	0
161	Building - Contribution from Land	7/31/90	0	0
165	Building	8/31/90	0	0
167	Building	9/30/90	0	0
168	Building	9/30/90	0	0
171	Forklift	1/31/91	0	0
173	Back Wall	6/30/91	0	0
174	Air Conditioning	9/30/91	0	0
179	Stands/Shelving	11/30/92	0	0
181	Display Case/Shelves	12/31/92	0	0
201	Freight for Racks	4/06/95	0	0
202	Racks	4/25/95	0	0
203	(10) '17" White Hanger	5/11/95	0	0
204	(100) '17" White Hanger	5/22/95	0	0
207	Building Improvement	6/30/95	0	0
209	Shelving	10/05/95	0	0
210	Freight for Above	10/11/95	0	0
211	Shelving	10/12/95	0	0
212	Racks	10/24/95	0	0
213	Freight for Above	10/24/95	0	0
215	Telephone System	10/31/95	0	0
216	Racks	10/31/95	0	0
218	Shopping Carts	11/01/95	0	0
219	Unload Store Fixtures	11/13/95	0	0
220	4 Mile Road Store	11/15/95	0	0
221	Equipment	11/15/95	0	0
225	Racks	11/30/95	0	0
227	Freight	12/31/95	0	0
229	Drainage Easement	1/31/96	0	0
230	Drawings as-built	1/31/96	0	0
232	Racks	2/20/96	0	0
234	100KVA Transformer	6/27/96	0	0
238	Komatsu Forklift Truck	9/09/97	0	0
241	Yard King Mobile Yard Ramp	11/29/97	0	0
245	Signage	6/12/98	0	0
246	Letters for New Sign	8/21/98	0	0
247	Sprinkler Upgrade	10/23/98	0	0
249	Electrical Upgrade	2/19/99	0	0
258	Upgrade Computer	9/20/99	0	0
277	Repair Burl Building	8/31/99	0	0
346	Playground Equipment	3/14/03	0	0
358	Mavri-Sanyo 1700 Projector	5/29/03	0	0
360	Hoogerhyde Safe	12/03/02	0	0
366	Playground improv.	9/30/03	0	0
388	Carpet and Lumber	1/24/05	0	0
389	Portastudio	5/25/05	0	0
408	Burlingame store improvements	5/31/05	0	0
415	Office Furniture conference	12/26/06	0	0
423	Roofing	12/12/06	0	0
427	Shelving	4/07/07	0	0
437	Grandville store leasehold improvements	10/31/07	0	0
438	Pad printer	3/28/08	0	0
442	Carpet 4 mile	3/01/08	0	0

Asset	Description	Date In Service	Cost	MI
457	2008 Ford E350	7/01/08	30,000	0
460	Recycle Bins	6/04/09	0	0
461	Carpet Analyzer	3/03/09	0	0
468	Office Furniture in New Location	10/09/09	0	0
472	Security Camera	6/29/10	0	0
476	Secutiry Camera	6/29/10	0	0
480	Security Camera	10/29/10	0	0
491	Drop Boxes	12/31/11	0	0
496	Steel Door	7/25/11	0	0
500	Grocery Carts	4/29/12	0	0
501	New Seal on Roof	5/03/12	0	0
502	Steel Bookcase	4/30/12	0	0
506	Attila MAC Computer	6/30/12	0	0
507	Storage Shed for Burlingame	2/01/13	0	0
508	Hangers	9/28/12	1,103	0
511	Hangers	9/28/12	1,103	0
512	Hangers	9/28/12	384	0
514	Container	1/28/13	3,475	0
519	Camera, Lens	11/06/12	0	0
520	Computer and Monitor Greg	5/10/13	0	0
521	Wall System for back office	6/06/13	0	0
522	Sound Mixer	6/19/13	0	0
523	Overhead Door	4/25/13	0	0
524	Container	5/31/13	0	0
525	Racks and Beams for Back Room	4/17/13	0	0
526	3 Containers	6/13/13	0	0
530	Atilla's Computer	8/28/13	620	0
531	Edge of Dock and Transition Plate	1/20/14	2,340	0
533	Fred's Donated Truck	2/02/14	7,500	0
534	Cash Register	9/23/13	700	0
537	Cash Register	8/29/13	1,400	0
538	Cap for Pallet Truck	7/24/13	584	0
539	Drop Boxes	8/27/13	419	0
540	Cash Register	7/12/13	1,400	0
541	2 Containers	7/02/13	6,450	921
542	Steel Cage	7/09/13	150	0
543	Floor Scale	12/31/13	964	0
544	Floor Scale	12/31/13	964	0
547	Cash Register	9/13/13	250	0
548	New door for break room	12/17/18	662	66
549	Cash Register	9/13/13	700	0
550	Computer (Kathy)	10/04/18	621	207
551	Battery for hilo	8/26/13	5,683	0
553	Spiral Wishing Well	2/08/15	750	87
554	Computer Development Director	4/29/15	495	82
555	Computer Change Your World Director	4/29/15	400	67
556	Drop Boxes	7/08/15	1,800	0
558	Hand Truck	12/09/15	139	0
559	Hand Truck	12/09/15	207	0
560	Scale and Ramp	3/25/16	2,790	558
561	Equipment Board Room	4/28/16	932	187
562	TV and Router for Conference Room	4/15/16	785	157
563	Box Truck	12/16/15	10,737	2,147
564	Sprinter Van	12/09/15	12,000	1,714
565	Land Apline Office	12/16/15	10,000	0
566	Building Apline Office	12/16/15	499,063	12,477
567	Computers (Feeding the Hungry)	12/16/15	3,400	680
568	Software (Feeding the Hungry)	12/16/15	510	0
571	Freezer (Feeding the Hungry)	12/16/15	3,203	457
572	Freezer (Feeding the Hungry)	12/16/15	1,931	276
573	Pallet Jeck, Carts (Feeding the Hungry)	12/16/15	4,693	939
574	Sign for Burlingame	4/30/16	1,560	223
575	Parking Lot Asphalt	4/30/16	10,000	1,000
576	Office Redo	6/30/16	15,000	375
578	Lettering for Truck	4/30/16	1,350	0
581	Alpine Office Building	8/19/16	27,280	682
582	Roof Replacement	5/19/17	4,999	250
585	Debbie's office	4/10/18	3,911	98
586	Pallet Jack	1/11/18	559	112
587	Computer Kris	9/05/17	590	196
588	Computer Matt	10/28/17	515	172

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>MI</u>
589	Quickbooks	5/29/18	800	267
590	2 Air conditioning units	8/21/18	9,997	1,000
591	Computer (Liberty)	12/03/18	775	258
592	Computer (Greg)	11/28/18	780	260
593	5x10 trailer with ramp	4/23/19	1,338	191
594	Podcasting Equipment	4/01/19	2,982	596
595	Computer for Greg	5/08/19	630	210
	Total Other Depreciation		<u>704,373</u>	<u>26,912</u>
	Total ACRS and Other Depreciation		<u>704,373</u>	<u>26,912</u>
	Grand Totals		<u>704,373</u>	<u>26,912</u>

Asset	Description	Date In Service	Cost	MI
Other Depreciation:				
10	Hangers	7/20/95	0	0
11	Racks	7/20/95	0	0
12	Shopping Carts	9/08/95	0	0
15	Safe	2/20/96	0	0
49	Racks	3/15/95	0	0
50	Racks	7/15/95	0	0
51	Racks	7/17/95	0	0
52	Sign	7/27/95	0	0
53	Pallet Truck	7/28/95	0	0
54	Fire Extinguishers	8/04/95	0	0
56	Racks	8/15/95	0	0
57	Sign	7/20/95	0	0
393	Hoogerhyde safe	10/22/04	0	0
410	Muskegon Valueland Store	5/01/06	0	0
421	Muskegon Store Addition	7/21/06	0	0
471	Security Camera	6/29/10	0	0
509	Hangers	9/28/12	1,103	0
528	2 Containers	6/13/13	0	0
535	Cash Register	8/29/13	1,100	0
546	Floor Scale	12/31/13	964	0
583	New Roof	9/26/16	31,600	1,580
584	Sign	11/07/16	4,000	571
	Total Other Depreciation		<u>38,767</u>	<u>2,151</u>
	Total ACRS and Other Depreciation		<u>38,767</u>	<u>2,151</u>
	Grand Totals		<u>38,767</u>	<u>2,151</u>

Asset	Description	Date In Service	Cost	MI
Other Depreciation:				
251	Irrigation System	9/14/99	0	0
252	Chain Link Fence	8/06/99	0	0
253	Parking Lot Lighting	1/22/00	0	0
279	Carpet/Vinyl	12/31/98	0	0
281	Building	12/31/98	0	0
282	Building	7/01/99	0	0
283	Sport Court	9/01/00	0	0
284	Basketball Baskets	9/29/00	0	0
285	Scoreboard	9/29/00	0	0
286	Bookstore Renovation	9/30/00	0	0
287	Bookstore Plumbing	10/13/00	0	0
288	Bookstore Renovation	11/30/00	0	0
289	Painting	2/17/01	0	0
290	Install Lighting	3/30/01	0	0
298	Carpet	10/27/00	0	0
323	Gym Addition-Home School	8/31/01	0	0
324	Paint Gym-Home School	11/06/01	0	0
325	Facility Improvement-HSB	1/10/02	0	0
326	Building Corner Gaurds-HSB	3/14/02	0	0
363	Double doors for gym	12/01/02	0	0
364	gym floor volleyball court	2/27/04	0	0
398	New bookstore	11/01/04	0	0
	Total Other Depreciation		<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>0</u>	<u>0</u>
	Grand Totals		<u>0</u>	<u>0</u>

Form 990	Event Income and Deduction Worksheet	2018
Description SALE OF INVENTORY		

Name WORLD MISSION INC	Taxpayer Identification Number 38-3213457
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Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.		714,520
2. Advertising income	2.		
3. Circulation income	3.		
4. Other income	4.		
5. Returns and allowances	5.		
6. Contributions received	6.		
7. Total revenue. Add lines 1 through 6	7.		714,520
8. Cost of Goods Sold	8.		653,792
9. Employment Expense	9.		
10. Fees for services	10.		
11. Indirect Expense	11.		
12. Depreciation Expense	12.		
13. Exempt Activity Expense	13.		
14. Fundraising Expense	14.		
15. Total expenses. Add lines 8 through 14	15.		653,792
16. Net Income/Loss. Line 7 minus Line 15	16.		60,728

Expense Details - Indirect Expense:

Advertising and promotion	_____
Office	_____
Printing/publication/postage	_____
Info technology/Maintenance	_____
Royalties & License Fees	_____
Occupancy/Real Estate Taxes	_____
Travel & Repairs	_____
Travel/entertainment (officials)	_____
Conferences/meetings	_____
Interest	_____
Insurance	_____
Total Indirect Expense	_____

Expense Details - Depreciation Expense:

On investment property	_____
On non-investment property	_____
Amortization	_____
Depletion	_____
Total Depreciation Expense	_____

Expense Details - Exempt Activity Expense:

Repairs/Maintenance/Other	_____
Bad debts	_____
Taxes/licenses	_____
Charitable contributions	_____
Dividend recd deductions	_____
Readership costs	_____
Total Exempt Activity Expense	_____

Expense Details - Fundraising Expense:

Cash prizes	_____
Non-cash prizes	_____
Rent and facility costs	_____
Food & beverages (Part II only)	_____
Entertainment (Part II only)	_____
Other direct expenses	_____
Total Fundraising Expense	_____

Expense Details - Cost of Goods Sold:

Beginning inventory	_____
Purchases	113,777
Labor	540,015
Section 263A costs	_____
Other costs	_____
Ending inventory	_____
Total Cost of Goods Sold	653,792

Expense Details - Employment Expense:

Compensation of officers	_____
Other salaries and wages	_____
Pension plan contributions	_____
Other employee benefits	_____
Payroll taxes	_____
Total Employment Expense	_____

Expense Details - Fees for Services:

Management	_____
Legal	_____
Accounting	_____
Lobbying	_____
Professional fundraising	_____
Investment management	_____
Other	_____
Total Fees for Services	_____

Information is indicated for use on Form 990-T schedule:

- Schedule E
- Schedule F
- Schedule G
- Schedule I
- Schedule J

Allocation of Expense to Program Service Accomplishments:

First	_____
Second	_____
Third	_____
All other	_____

Form 990	Event Income and Deduction Worksheet	2018
Description FALL DINNER		

Name WORLD MISSION INC	Taxpayer Identification Number 38-3213457
----------------------------------	---

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.	
2. Advertising income	2.	
3. Circulation income	3.	
4. Other income	4.	
5. Returns and allowances	5.	
6. Contributions received	6.	98,818
7. Total revenue. Add lines 1 through 6	7.	98,818
8. Cost of Goods Sold	8.	
9. Employment Expense	9.	
10. Fees for services	10.	
11. Indirect Expense	11.	
12. Depreciation Expense	12.	
13. Exempt Activity Expense	13.	35,328
14. Fundraising Expense	14.	
15. Total expenses. Add lines 8 through 14	15.	35,328
16. Net Income/Loss. Line 7 minus Line 15	16.	63,490

Expense Details - Indirect Expense:

Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Insurance	
Total Indirect Expense	

Expense Details - Depreciation Expense:

On investment property	
On non-investment property	
Amortization	
Depletion	
Total Depreciation Expense	

Expense Details - Exempt Activity Expense:

Repairs/Maintenance/Other	35,328
Bad debts	
Taxes/licenses	
Charitable contributions	
Dividend recd deductions	
Readership costs	
Total Exempt Activity Expense	35,328

Expense Details - Fundraising Expense:

Cash prizes	
Non-cash prizes	
Rent and facility costs	
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	
Total Fundraising Expense	

Expense Details - Cost of Goods Sold:

Beginning inventory	
Purchases	
Labor	
Section 263A costs	
Other costs	
Ending inventory	
Total Cost of Goods Sold	

Expense Details - Employment Expense:

Compensation of officers	
Other salaries and wages	
Pension plan contributions	
Other employee benefits	
Payroll taxes	
Total Employment Expense	

Expense Details - Fees for Services:

Management	
Legal	
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
Total Fees for Services	

Information is indicated for use on Form 990-T schedule:

- Schedule E
- Schedule F
- Schedule G
- Schedule I
- Schedule J

Allocation of Expense to Program Service Accomplishments:

First	
Second	
Third	
All other	

Form 990/990PF	Rent Income and Deduction Worksheet	2018
Name WORLD MISSION INC		Taxpayer Identification Number 38-3213457
Description MUSKEGON RENTAL		

Use this summary worksheet to verify data entered for a specific activity for your rental information

1. Gross rents	1.	<u>45,603</u>
Expenses (see details on worksheets below):		
2. Fees for services	2.	
3. Depreciation Expense	3.	<u>25,037</u>
4. Direct Expense	4.	<u>11,354</u>
5. Total expenses. Add lines 8 through 12	5.	<u>36,391</u>
6. Net Income/Loss. Line 7 minus Line 13	6.	<u>9,212</u>

Expense Details - Fees for Services:

Accounting	_____
Legal	_____
Commissions	_____
Management	_____
Other Professional Fees	_____
Total Fees for Services	_____

Expense Details - Depreciation Expense:

On non-investment property	<u>25,037</u>
On investment property	_____
Amortization	_____
Depletion	_____
Total Depreciation Expense	<u>25,037</u>

Expense Details - Direct Expense:

Interest	<u>10,005</u>
Taxes/licenses	_____
Occupancy Expenses	_____
Repairs & Maintenance	_____
Travel/conferences/meetings	_____
Printing & Publication	_____
Advertising	_____
Insurance	<u>1,349</u>
Utilities	_____
Supplies	_____
Other expenses	_____
Total Direct Expense	<u>11,354</u>

Information is being used for the following Form 990-T schedules:

- Schedule C
- Schedule E
- Schedule F
- Schedule G

Expense Allocation to Program Service Accomplishments for 990/990EZ:

- First
- Second
- Third
- All other

Form 990/990PF	Rent Income and Deduction Worksheet	2018
Name WORLD MISSION INC		Taxpayer Identification Number 38-3213457
Description HOME SCHOOL BUILDING RENTAL		

Use this summary worksheet to verify data entered for a specific activity for your rental information

1. Gross rents	1.	<u>218,750</u>
Expenses (see details on worksheets below):		
2. Fees for services	2.	
3. Depreciation Expense	3.	<u>35,708</u>
4. Direct Expense	4.	
5. Total expenses. Add lines 8 through 12	5.	<u>35,708</u>
6. Net Income/Loss. Line 7 minus Line 13	6.	<u>183,042</u>

Expense Details - Fees for Services:

Accounting	_____
Legal	_____
Commissions	_____
Management	_____
Other Professional Fees	_____
Total Fees for Services	_____

Expense Details - Depreciation Expense:

On non-investment property	<u>35,708</u>
On investment property	_____
Amortization	_____
Depletion	_____
Total Depreciation Expense	<u>35,708</u>

Expense Details - Direct Expense:

Interest	_____
Taxes/licenses	_____
Occupancy Expenses	_____
Repairs & Maintenance	_____
Travel/conferences/meetings	_____
Printing & Publication	_____
Advertising	_____
Insurance	_____
Utilities	_____
Supplies	_____
Other expenses	_____
Total Direct Expense	_____

Information is being used for the following Form 990-T schedules:

- Schedule C
- Schedule E
- Schedule F
- Schedule G

Expense Allocation to Program Service Accomplishments for 990/990EZ:

First	<u>35,708</u>
Second	_____
Third	_____
All other	_____

Form 990	Two Year Comparison Report	2017 & 2018
For calendar year 2018, or tax year beginning 07/01/18 , ending 06/30/19		

Name

Taxpayer Identification Number

WORLD MISSION INC**38-3213457**

		2017	2018	Differences
R e v e n u e	1. Contributions, gifts, grants	1. 2,016,354	1,516,637	-499,717
	2. Membership dues and assessments	2.		
	3. Government contributions and grants	3.		
	4. Program service revenue	4. 195,381	388,351	192,970
	5. Investment income	5. 56	66	10
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7. 104,086		-104,086
	8. Net income or (loss) from fundraising events	8. -36,239	-35,328	911
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10. 164,004	60,728	-103,276
	11. Other revenue	11. 5,919	9,212	3,293
	12. Total revenue. Add lines 1 through 11	12. 2,449,561	1,939,666	-509,895
E x p e n s e s	13. Grants and similar amounts paid	13. 1,172,815	1,169,862	-2,953
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15.		
	16. Salaries, other compensation, and employee benefits	16. 429,266	379,185	-50,081
	17. Professional fundraising fees	17.		
	18. Other professional fees	18. 49,437	61,398	11,961
	19. Occupancy, rent, utilities, and maintenance	19. 35,977	35,977	
	20. Depreciation and Depletion	20. 129,566	105,323	-24,243
	21. Other expenses	21. 560,697	540,596	-20,101
	22. Total expenses. Add lines 13 through 21	22. 2,377,758	2,292,341	-85,417
	23. Excess or (Deficit). Subtract line 22 from line 12	23. 71,803	-352,675	-424,478
O t h e r I n f o r m a t i o n	24. Total exempt revenue	24. 2,449,561	1,939,666	-509,895
	25. Total unrelated revenue	25. 5,919	9,212	3,293
	26. Total excludable revenue	26. 463,527	449,145	-14,382
	27. Total assets	27. 4,105,346	3,700,135	-405,211
	28. Total liabilities	28. 1,285,423	1,232,887	-52,536
	29. Retained earnings	29. 2,819,923	2,467,248	-352,675
	30. Number of voting members of governing body	30. 10	11	
	31. Number of independent voting members of governing body	31. 7	9	
	32. Number of employees	32. 86	64	
	33. Number of volunteers	33. 10	10	

Form 990T		Two Year Comparison Report		2017 & 2018	
Name		For calendar year 2018, or tax year beginning 07/01/18 , ending 06/30/19		Taxpayer Identification Number	
WORLD MISSION INC				38-3213457	
		2017	2018	Differences	
Revenue	1. Gross profit/loss on business activities	1.			
	2. Capital gains/losses	2.			
	3. Income/loss from partnerships and S corporations	3.			
	4. Rental income (net of expense)	4.			
	5. Unrelated debt-financed income (net of expense)	5.	2,100	3,030	930
	6. Interest, and other income from controlled organizations (net of expense)	6.			
	7. Investment income of specific organizations (net of expense)	7.			
	8. Exploited exempt activity income (net of expense)	8.			
	9. Advertising income (net of expense)	9.			
	10. Other income	10.			
	11. Total trade or business income. Combine lines 1 through 10	11.	2,100	3,030	930
Expenses	12. Compensation of officers, directors, and trustees	12.			
	13. Other salaries and wages	13.			
	14. Repairs and maintenance	14.			
	15. Bad debts	15.			
	16. Interest	16.			
	17. Taxes and licenses	17.			
	18. Charitable contributions	18.			
	19. Depreciation and Depletion	19.			
	20. Contributions to deferred compensation plans	20.			
	21. Employee benefit programs	21.			
	22. Other deductions	22.			
	23. Total deductions. Add lines 12 through 22	23.			
	24. Net income on Page 1; Subtract line 23 from 11	24.	2,100	3,030	930
	25. Unrelated business taxable income from all trades	25.	2,100	3,030	930
	26. Disallowed employee fringe benefits	26.			
	27. Net operating loss (pre-2018)	27.			
	28. Taxable income after NOL loss	28.	2,100	3,030	930
	29. Specific deduction	29.	1,000	1,000	
	30. Unrelated business taxable income.	30.	1,100	2,030	930
Tax & Credits	31. Income tax (corporate or trust)	31.	198	426	228
	32. Proxy tax	32.			
	33. Other taxes	33.			
	34. Total taxes	34.	198	426	228
	35. Other credits	35.			
	36. General business credit	36.			
	37. Credit for prior year minimum tax	37.			
	38. Total credits	38.			
	39. Net tax after credits	39.	198	426	228
	40. Recapture taxes and 965 tax	40.			
	41. Total Taxes	41.	198	426	228
Due/Refund	42. Prior year overpayment and estimated tax payments	42.			
	43. Payment made with extension	43.		648	648
	44. Backup withholding and foreign withholding	44.			
	45. Other payments	45.			
	46. Total payments	46.		648	648
	47. Balance due/(Overpayment)	47.	198	-222	-420
	48. Overpayment applied to next year	48.		222	222
	49. Penalties	49.			
	50. Total due/(Refund)	50.	198		-198

Form 990	Tax Return History	2018
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Name WORLD MISSION INC	Employer Identification Number 38-3213457
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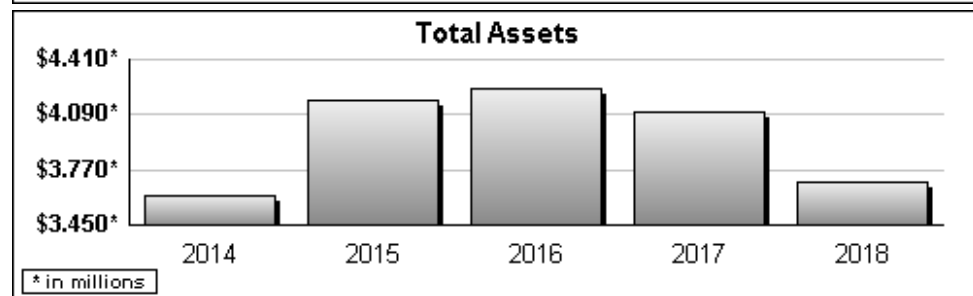
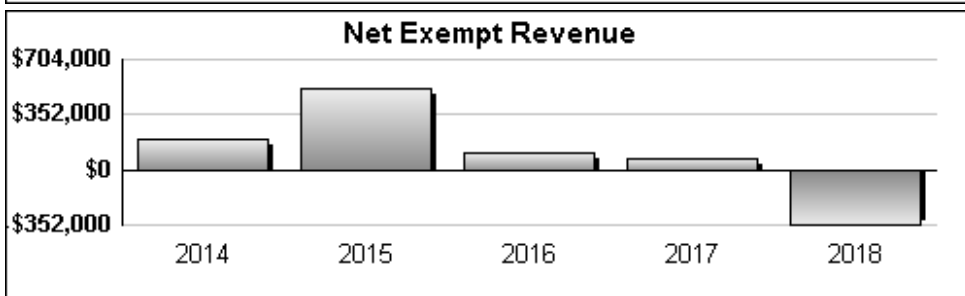
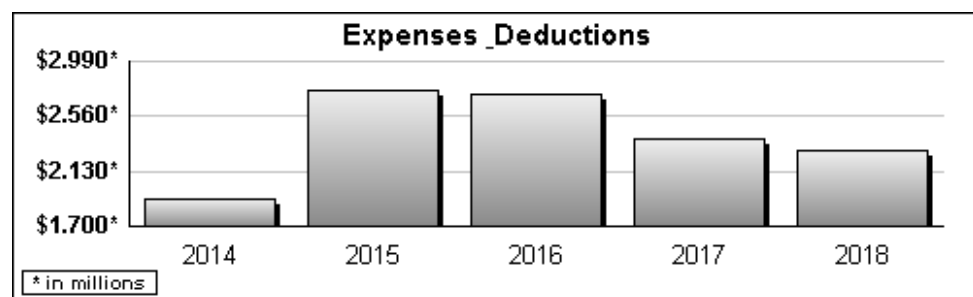
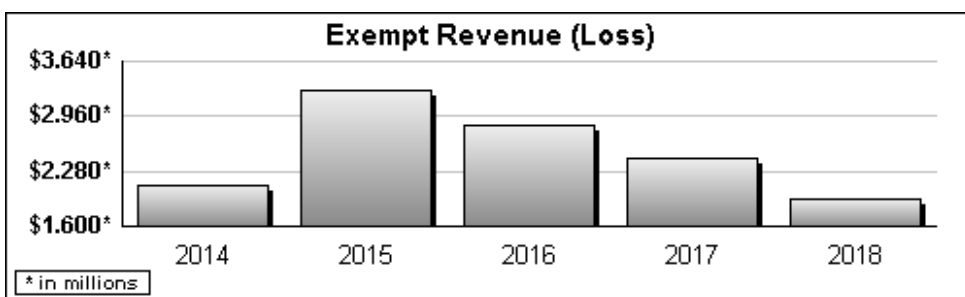
	2014	2015	2016	2017	2018	2019
Contributions, gifts, grants	1,323,196	2,190,561	2,302,309	2,016,354	1,516,637	
Membership dues						
Program service revenue	110,067	518,513	144,476	195,381	388,351	
Capital gain or loss	500	-5,657	-5,457	104,086		
Investment income	278	27	8	56	66	
Fundraising revenue (income/loss)		-22,836	-30,345	-36,239	-35,328	
Gaming revenue (income/loss)						
Other revenue	675,598	603,864	430,756	169,923	69,940	
Total revenue	2,109,639	3,284,472	2,841,747	2,449,561	1,939,666	
Grants and similar amounts paid	494,092	841,356	1,312,399	1,172,815	1,169,862	
Benefits paid to or for members						
Compensation of officers, etc.	73,000					
Other compensation	321,196	557,683	504,369	429,266	379,185	
Professional fees	35,809	37,725	37,258	49,437	61,398	
Occupancy costs	123,065	119,583	90,888	35,977	35,977	
Depreciation and depletion	147,949	149,739	144,643	129,566	105,323	
Other expenses	719,714	1,057,436	645,342	560,697	540,596	
Total expenses	1,914,825	2,763,522	2,734,899	2,377,758	2,292,341	
Excess or (Deficit)	194,814	520,950	106,848	71,803	-352,675	
Total exempt revenue	2,109,639	3,284,472	2,841,747	2,449,561	1,939,666	
Total unrelated revenue			17,241	5,919	9,212	
Total excludable revenue	786,443	1,116,747	552,542	463,527	449,145	
Total Assets	3,615,908	4,177,799	4,244,233	4,105,346	3,700,135	
Total Liabilities	1,495,586	1,536,527	1,496,113	1,285,423	1,232,887	
Net Fund Balances	2,120,322	2,641,272	2,748,120	2,819,923	2,467,248	

Form 990T	Tax Return History	2018
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Name WORLD MISSION INC	Employer Identification Number 38-3213457
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* Income shown net of expenses

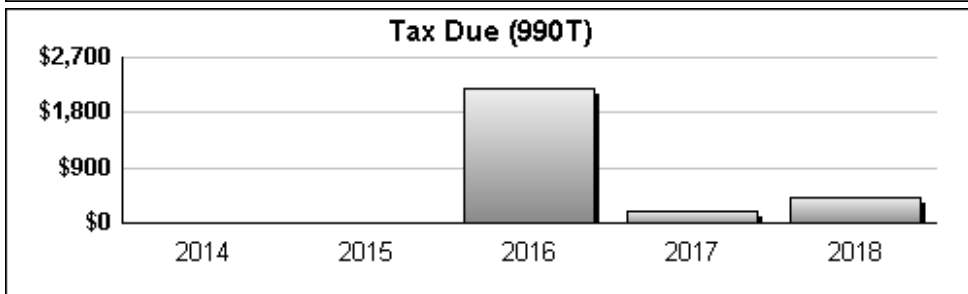
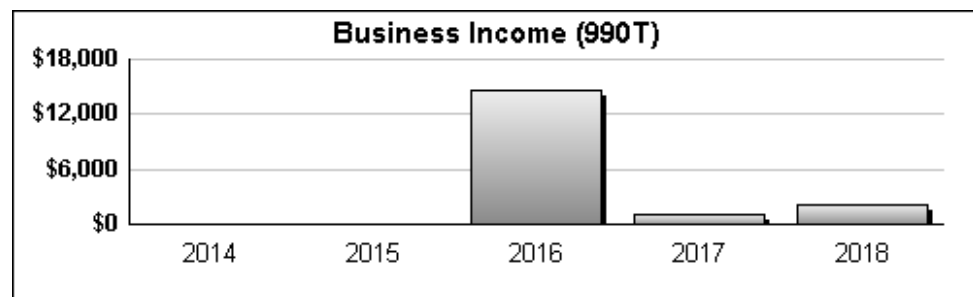
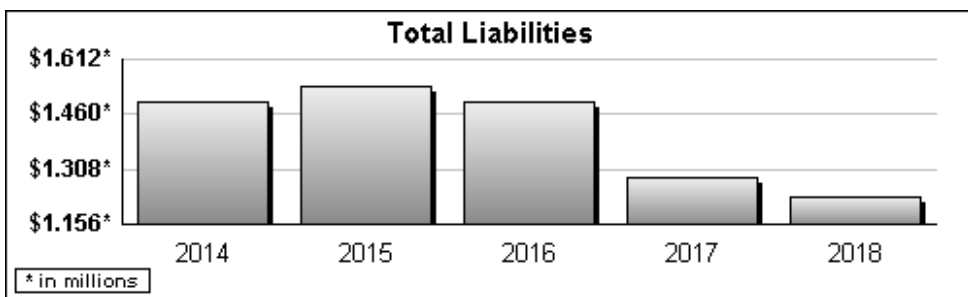
	2014	2015	2016	2017	2018	2019
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*				2,100	3,030	
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income			33,660			
Total trade or business income.			33,660	2,100	3,030	
Compensation of officers, ect.						
Other salaries and wages						
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion			16,419			
Deferred compensation plans						
Employee benefit programs						



Form 990T	Tax Return History	2018
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Name WORLD MISSION INC	Employer Identification Number 38-3213457
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	2014	2015	2016	2017	2018	2019
Other deductions			1,650			
Net income (990T/first activity)			15,591	2,100	3,030	
UBTI from all trades	0	0	15,591	2,100	3,030	
Taxable employee fringe benefits						
Net operating loss deduction						
Specific deduction			1,000	1,000	1,000	
Income after expense and deductions			14,591	1,100	2,030	
Income tax (corporate or trust)			2,189	198	426	
Other taxes						
Total taxes			2,189	198	426	
General business credit						
Other credits						
Net tax after credits			2,189	198	426	
Estimated tax payments						
Other payments					648	
Balance due/Overpayment			2,189	198	-222	



Taxable Interest on Investments

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INTEREST INCOME	\$ 66				14	
TOTAL	<u>\$ 66</u>					

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
CONSULTING	\$ 18,178	\$ 18,178	\$	\$
TOTAL	<u>\$ 18,178</u>	<u>\$ 18,178</u>	<u>\$ 0</u>	<u>\$ 0</u>

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

Description	Total Expenses	Program Service	Management & General	Fund Raising
DUES & SUBSCRIPTIONS	\$ 20,158	\$ 19,924	\$ 234	\$
REPAIRS AND MAINTENANCE	11,385	11,385		
BANK FEES	9,331	9,331		
TELEPHONE	6,013	2,637	1,816	1,560
MISCELLANEOUS	196	196		
TOTAL	<u>\$ 47,083</u>	<u>\$ 43,473</u>	<u>\$ 2,050</u>	<u>\$ 1,560</u>

Schedule A, Part II, Line 10(e)

Description	Amount
SALE OF INVENTORY	\$ 714,520
TOTAL	<u>\$ 714,520</u>

Schedule A, Part III, Line 7a - Support from Disqualified Persons

Donor Name	2014	2015	2016	2017	2018
PAUL LAND	\$ 123,523	\$ 788,987	\$ 51,000	\$ 10,838	\$
JUDY LAND					1,800
ROGER LUCAS	6,425	15,500	5,000	4,500	1,950
LAND & CO	40,567	61,758	540,815	181,520	60,377
WIMBLEDON PARK APARTMENTS	12,000		12,000	12,000	12,000
DAN HIBMA	4,708	29,188	6,835	3,000	21,286
KURT POLL		17,500	120,000	49,450	
DAVE DISHAW	5,235	1,130	2,629	6,686	25,800
MARK YOUNG	5,144	92		4,500	20,000
GREG HEERES	3,500	1,000	1,000		1,200
TODD ACKERMAN		1,000	1,000		
GREG KELLEY		2,790	1,218	1,250	1,600
MARK STRANDBERG	1,800	1,023	1,050	650	800
SALLY VANDERPLOEG		1,500			2,000
SCOTT HAGAN					
KEVIN ROOSIEN					2,150
SCOTT BAKER					3,750
TOTAL	<u>\$ 202,902</u>	<u>\$ 921,468</u>	<u>\$ 742,547</u>	<u>\$ 274,394</u>	<u>\$ 154,713</u>

Schedule A, Part III, Line 7b - Excess Gross Receipts

Donor Name	Total	Excess
IN TOUCH MINISTRIES	\$	\$
2018	258,418	234,444
2017	389,859	358,733
2016	259,920	220,491
BIBLES FOR MISSIONS THRIFT CENTERS		
2018	285,800	261,826
2017	214,973	183,847
2016	176,667	137,238
2015	126,129	80,225
2014	62,200	28,720
ADA BIBLE CHURCH		
2015	80,550	34,646
BURGESS TECHNICAL SYSTEMS INC.		
2016	43,500	4,071
2014	50,000	16,520
CORNERSTONE UNITED METHODIST CHURCH		
2016	62,897	23,468
2015	56,389	10,485
2014	100,799	67,319
NATIONAL CHRISTIAN FOUNDATION		
2018	30,525	6,551
2016	47,899	8,470
2014	53,500	20,020
REFORMED CHURCH OF CORINTH		
2016	67,581	28,152
RICHARD EBELING		
2014	43,044	9,564
VANGUARD CHARITABLE TRUST		
2018	80,200	56,226
2015	67,098	21,194
2014	41,000	7,520
WATERSTONE		
2015	50,000	4,096
KOHL FOUNDATION		
2018	55,750	31,776
TOTAL	\$ <u>2,704,698</u>	\$ <u>1,855,602</u>

Schedule A, Part III, Line 10b

Description	Amount
MUSKEGON RENTAL	\$ 3,030
LESS: DEDUCTIONS	-1,000
LESS: TAXES	-426
TOTAL	\$ <u>1,604</u>