Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2017 Open to Public Inspection 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 B | For the 2017 of Check if applicable: | calendar year, or tax C Name of organization | year begi | inning 0 | 7/01/17 | , and ending 06 | /30/1 | | Employ | er identification number | |
|--------------------------------|---|--|-----------------|------------------|--|--|----------------------|---------------------------------------|---------------|---------------------------------------|--|
| ļ | Address change | | Mis | sion P | ossible | | | | ļ | | |
| | Name change | Doing business as | | | | | | | 34-1 | 290940 | |
| ļ | i ì | Number and street (or P 306 W. Bige | | il is not delive | red to street addres | s) | | | | ne number - 422 – 3364 | |
| | Initial return Final return/ | City or town, state or pro | | ry, and ZIP or | foreign postal code | | L | | <u> </u> | 122-3301 | |
| | terminated | Findlay | | • | OH 45840 |) | | l, | Gross red | ceipts\$ 1,250,049 | |
| L | Amended return | F Name and address of pr | incipal officer | r; | | | | | GIOSS IE | | |
| | Application pending | David Rat | h | | | | | H(a) Is this a group | return for s | subordinates? Yes X No | |
| | | | | | | | | H(b) Are all subore | dinates inc | luded? Yes No | |
| | | | | | | | | If "No," at | tach a list. | (see instructions) | |
| 1 | Tax-exempt status: | X 501(c)(3) | 501(c) (| | (insert no.) | 4947(a)(1) or 52 | 27 | | | | |
| J | Website: W | ww.OurMiss | <u>ionIs</u> | Possi | ble.org | | | H(c) Group exemp | | · · · · · · · · · · · · · · · · · · · | |
| 77.000 | Form of organization: | | Trust | Association | Other ► | | L Ye | ar of formation: 19 | 79 | M State of legal domicile: OH | |
| | | ımmary | | | | | | | | | |
| | | escribe the organization | on's missic | on or most | significant acti | vities: | | | | | |
| ဥ္ | see | Schedule O | | | | | | | | | |
| Activities & Governance | • | | | | | | | | | | |
| ver | 2 Chook thi | is how his if the are | | diagontinu | ad its appretia | ns or disposed of more | | | | | |
| ő | 2 Check thi | | | | | a) | | | | 12 | |
| ەق ي | 4 Number | of independent voting | membere | of the gove | erning body /P | art VI, line 1b) | | | 4 | 12 | |
| itie | 5 Total num | | | | | V, line 2a) | | | 5 | 11 | |
| 햕 | 6 Total num | ber of volunteers (es | | | | | | | 6 | 170 | |
| ⋖ | | elated business reven | | | | 12 | | | 7a | 0 | |
| | li i | ated business taxable | | | | | | | 7b | 0 | |
| | | | | | | | T | Prior Year | | Current Year | |
| 9 | 8 Contributi | ons and grants (Part | VIII, line 1 | h) | | | | 819, | 893 | 1,086,515 | |
| enu | 9 Program | service revenue (Part VIII, line 2g) nt income (Part VIII, column (A), lines 3, 4, and 7d) | | | | | | <u> </u> | | 0 | |
| Revenue | 10 Investmen | nt income (Part VIII, c | olumn (A) | , lines 3, 4 | , and 7d) | | | | 142 | 5,800 | |
| • | 11 Other rev | | | | | 11e) | | 121, | $\overline{}$ | 147,125 | |
| | | | | | | mn (A), line 12) | | 945, | 999 | 1,239,440 | |
| | | d similar amounts pa | | | | | | | | <u> </u> | |
| | 1 | | | | | (A) Emp E (O) | | 311, | 274 | <u> </u> | |
| Expenses | 15 Salaties, | other compensation, t nal fundraising fees (F | employee | benenis (r | an ix, column | (A), lines 5–10) | ····· - | <u> </u> | 2/2 | 309,900 n | |
| Den | h Total fund | rraising expenses (Pa | rt IX. colou | ma (D) lin | nie i le) ≘ 251 b - | 90,043 | | | | <u> </u> | |
| ᅑ | 17 Other exp | enses (Part IX, colum | | | 1 146 246) | | | 802, | 855 | 953,880 | |
| | 1 | | | | | line 25) | | 1,114, | | 1,323,840 | |
| | | less expenses. Subtra | | | | | | -168, | | -84,400 | |
| 20.5 | | | | | and the second s | | | Beginning of Curren | t Year | End of Year | |
| Net Assets or Fund Balances | 20 Total asse | ets (Part X, line 16) | | | | | | 1,658, | | 1,620,102 | |
| et A | 21 Total liabil | lities (Part X, line 26) | | | | | | 153, | | 167,087 | |
| 7777.0000 | | s or fund balances. Su | ubtract line | e 21 from l | ine 20 | • | | 1,505, | 770 | 1,453,015 | |
| | | nature Block | | | | | <u> </u> | | | | |
| | • • | | | | | empanying schedules and all information of which pr | | • | of my kno | owledge and belief, it is | |
| | 1 | | | | ., | | | , any monety | T | | |
| Sig | ın Sid | nature of officer | | | | | | | Date | | |
| He | | David Rath | | | | P۲ | resid | ent | | | |
| 110 | | pe or print name and title | | | | | COLG | <u> </u> | | | |
| | | preparer's name | | | Preparer's signatu | ire | | Date | Check | if PTIN | |
| Paid | d Robin I | . Ridge, CPA | | | Robin L. Ri | idge, CPA | | 01/07/19 | | bloyed P00025172 | |
| Pre | parer Firm's nam | | e & C | | y CPA, | | | · · · · · · · · · · · · · · · · · · · | EIN ▶ | 34-1935986 | |
| Use | Only | | | din S | | | | | | | |
| | Firm's addr | ess Find | lay, 🤄 | OH 4 | 5840 | | | Phon | e no. | 419-424-1835 | |
| May | the IRS discuss | this return with the p | reparer sh | own above | e? (see instruc | tions) | | | | X Yes No | |
| page | Daniel D. | 45 4-4 81-45 | | | | | | | | AAA | |

OMB No. 1545-0047

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

Form 990 (2017) Mission Possible Part IV Checklist of Required Schedules (continued)

| | | | Yes | |
|--------|--|--------------------|-----|----------|
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | ļ | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | ļ | |
| 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? If "Yes," complete Schedule I, Parts I and II | 21 | | X |
| 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? If "Yes," complete Schedule I, Parts I and III | 22 | ļ | X |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the | | | ŀ |
| | organization's current and former officers, directors, trustees, key employees, and highest compensated | | | |
| | employees? If "Yes," complete Schedule J | 23 | ļ | Х |
| :4a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than | | | |
| | \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b | | | |
| | through 24d and complete Schedule K. If "No," go to line 25a | 24a | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year | | | |
| | to defease any tax-exempt bonds? | 24c | | |
| d - | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 5a | ()(), ()(), () () () () () () | | | |
| | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | X |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior | | | Į |
| | year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? | | | |
| | If "Yes," complete Schedule L, Part I | 25b | | X |
| 6 | 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? If "Yes," complete Schedule L, Part II | 26 | | X |
| 7 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, | | | |
| | substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled | | | |
| | entity or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | X |
| 3 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, | | | |
| | Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | X |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete | | | |
| | Schedule L, Part IV | 28b | - 1 | X |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) | | | |
| | was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | х |
| | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | X |
| | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | ····· = <u>-</u> | | |
| | conservation contributions? If "Vas." complete Schodule M | 30 | 1 | Х |
| | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. | | _ | |
| | | 31 | - 1 | x |
| ! | Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," | | | |
| | annulate Calculuda Al-David II | 32 | | x |
| | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | - JZ | | |
| | sections 301 7701-2 and 301 7701-32 If "Vas." complete Schadule P. Part I | 33 | | x |
| | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, | | | <u> </u> |
| | | 24 | | v |
| | or rv, and Paπ v, line τ Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 34 | | X |
|) | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a | 35a | - | |
| | controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | | - 1 | |
| | | 35b | | |
| | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | _ | | 35 |
| | | 36 | | X |
| | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, | | | |
| | Part VI | 37 | | X |
| | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and | | _ | |
| | 19? Note, All Form 990 filers are required to complete Schedule O. | 38 | X | |

| P | art V Statements Regarding Other IRS Filings and Tax Compliance | | | | ···· | ı agı | | |
|---------|---|-----------------|---|-----------|-----------|-------------|--|--|
| | Check if Schedule O contains a response or note to any line in this Part | V | <u></u> | <u> </u> | <u> </u> | 2 | | |
| 4- | Enterthe combination of the Control | i | | 90000 | Υ. | es N | | |
| 1a b | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 1a | | | | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b | 0 | | | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | | | | | | | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | | · · · · · · · · · · · · · · · · · · · | 10 | <u>c</u> | | | |
| 20 | Statements, filed for the calendar year ending with or within the year covered by this return | | 11 | | | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax return | 2a | 1 | 21 | b X | , | | |
| _ | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | | | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 15) | | | | | | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule | | | 38 | | 7 | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other | | , | 3t | - | +- | | |
| | over, a financial account in a foreign country (such as a bank account, securities account, or other file | | | | | | | |
| | account)? | iaiiciai | ı | | . . | , | | |
| b | If "Yes," enter the name of the foreign country: ▶ See Schedule O | • • • • • • • • | | | X | | | |
| _ | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial | | | | | | | |
| | (FBAR). | ACCOU | IIIS | | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | | | | v | | |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction | otion? | | 5a | | X | | |
| c | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | Suonr | • | | | +-^ | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | | <u>5c</u> | + | | | |
| | organization solicit any contributions that were not tax deductible as charitable contributions? | 10 | | 6- | | x | | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contribution | one or | | <u>6a</u> | + | +≏ | | |
| - | nifts were not tay deductible? |)115 VI | | e. | | | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | 6b | | | | |
| a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for | nnode | | | | | | |
| | and services provided to the payor? | goods | | 70 | 7 | X | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | • | 7a 7b | | +^ | | |
| С | 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 | | 70 | | | | |
| | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or | | ? | 7e | ** | x | | |
| | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra | | ······································ | 7f | +- | X | | |
| | If the organization received a contribution of qualified intellectual property, did the organization file Fo | | 9 as required? | | + | X | | |
| | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza | | | | 1 | X | | |
| | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine | | | | | t iii | | |
| | | - | *********** | 8 | | 4000000 | | |
| | Sponsoring organizations maintaining donor advised funds. | | ************* | ····· | | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 9a | 200000000 | 23 20000000 | | |
| | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | | | 9b | 1 | † | | |
| | Section 501(c)(7) organizations. Enter: | | | | | | | |
| а | 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 | | | | | | |
| | Section 501(c)(12) organizations. Enter: | | | | | | | |
| а | 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 | | 1 | | |
| b | f "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. | | | | | | | |
| а | s the organization licensed to issue qualified health plans in more than one state? | | | 13a | | | | |
| - 1 | Note. See the instructions for additional information the organization must report on Schedule O. | | | | | | | |
| b i | Enter the amount of reserves the organization is required to maintain by the states in which | | | | | | | |
| t | he organization is licensed to issue qualified health plans | 13b | | | | | | |
| c E | | 13c | | | | | | |
| | Did the organization receive any payments for indoor tanning services during the tax year? | | | 14a | | Х | | |
| b l | f "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule | 0 | | 14b | | | | |

Form 990 (2017) Mission Possible 34-1290940 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 Νo Enter the number of voting members of the governing body at the end of the tax year 12 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. Enter the number of voting members included in line 1a, above, who are independent 12 1b 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 2 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? X 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? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? X Each committee with authority to act on behalf of the governing body? X 8b 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? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? b 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done X 12c Did the organization have a written whistleblower policy? 13 X 13 14 Did the organization have a written document retention and destruction policy? X Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization X 15_b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ OH Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website | X | Another's website | X | Upon request | Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: Trace Roth 306 W. Bigelow

Findlay DAA

compensated employees; and former such persons.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) (D) (E) (F) Name and Title Average Position Reportable Reportable Estimated hours per (do not check more than one compensation compensation from amount of week box, unless person is both an from related other (list any officer and a director/trustee) the organizations compensation hours for organization (W-2/1099-MISC) from the related nstitutional trustee iey employee (W-2/1099-MISC) idividual trustee organization ghest compensated nployee organizations and related below dotted organizations line) (1) Pastor Herb Codington 12.00 Board Member 0.00 X 22,000 0 (2) Mark Yoder 2.00 Chairman of Board 0.00 X X 0 0 0 (3) John W Schwartz 2.00 X Vice Chairman 0.00 0 0 (4) Amanda Cronkleton 2.00 X X 0.00 0 Secretary 0 (5) Bruce Feeney 2.00 Treasurer 0.00 X X 0 0 0 (6) Patti Spiegel 1.00 Board Member 0.00 X 0 0 0 (7) Guthrie Bunn 1.00 Board Member 0.00 X 0 0 0 (8) Mark Macke 1.00 X Board Member 0.00 0 0 0 (9) Steve Sellers 1.00 X Board Member 0.00 0 0 0 (10) Lindsay Clevidence 1.00 Board Member 0.00 X 0 0 0 (11) Christopher Kinn 1.00 Board Member 0.00 0 0

| Part VII Section A. Office | rs, Directors, Tr | uste | es, k | Cey E | mp | loyee | es, a | and Highest Compensate | d Employees (continued) | 1.090 |
|---|--|-------------|-----------------------|-----------------------|----------------|---------------------------------|----------------|---|--|--|
| (A) Name and title | (B) Average hours per week (list any | b | ox, un | Po check less p | erson | than i is both or/trust | n an | (D) Reportable compensation from the | (E) Reportable compensation from related organizations | (F) Estimated amount of other compensation |
| | hours for related organizations below dotted line) | or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | organization (W-2/1099-MISC) | (W-2/1099-MISC) | from the organization and related organizations |
| (12) Jeff Eiden | | | | | | | | | | |
| Board Member | 0.00 | x | | | | | | 0 | C | |
| (13) David Rath | | | | | | | | V | | |
| President | 40.00 | | | x | | | | F2 F00 | | |
| (14) Trace Roth | 0.00 | | - | ^ | | | | 52,500 | 0 | |
| Director of Finance | 40.00 | | | x | | | | 51,825 | 0 | |
| | | | | | | | | | | |
| | | ļ | ļ | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | > | 126,325 | | |
| c Total from continuation she d Total (add lines 1b and 1c) | | | | | | | | 126,325 | | |
| Total number of individuals (i reportable compensation from | ncluding but not li | mite | d to | | | | oove | | \$100,000 of | |
| Did the organization list any f employee on line 1a? If "Yes, | ormer officer, dire | ector | , or t | ruste | e, k | ey er | nplo | yee, or highest compensat | ed | Yes No |
| 4 For any individual listed on lir organization and related orga | e 1a, is the sum of | of rep | oorta | ble o | comp | ensa | ation | | | |
| individual Did any person listed on line for services rendered to the o | | ue c | omp | ensa | tion | from | any | unrelated organization or i | ndividual | 4 X |
| Section B. Independent Contractor | | 98, C | зопц | лете | SUII | eguie | <i>3 J I</i> C | or such person | | 5 X |
| Complete this table for your fi compensation from the organ | ization. Report co | nsat mpe | ed ir nsat | ion fo | ende or the | nt co e cal | ontra enda | ectors that received more that year ending with or within | nan \$100,000 of n the organization's tax ye | ar. |
| Name and | (A) business address | | | | | | | Description | (B) on of services | (C) Compensation |
| | | | | | | | | | | |
| | | | ·• ·· ·· · | | | \perp | | | · · · · · · · · · · · · · · · · · · · | |
| | | | | | | _ | | | | |
| | · | ···· | | | | | | | | |
| | | | | | | | | *************************************** | | |
| 2 Total number of independent of received more than \$100,000. | | | | | | | | e listed above) who | ٥ | |

| Î | 'art | | ment of Reve k if Schedule (| | ntains a respons | se or note to any line | e in this Part VIII | | |
|--|----------|--|--|---------------------------------------|---|--|--|---|--|
| | | 5.00 | | | italii a raspaili | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| ints | 월 1 | a Federated ca | mpaigns | 1a | | | | | |
| S | ᅙ | b Membership | | 1b | | | | | |
| Ę, | 3 | c Fundraising | | 1c | | | | | |
| 5 | <u> </u> | d Related orga | | <u>1d</u> | | | | | |
| Si. | | e Government grant | | 1e | | _ | | | |
| uţi | <u> </u> | f All other contribution and similar amount | ons, gifts, grants, ts not included above | 4. | 1 006 5 | 1 - | | | |
| ig: | 5 | | ons included in lines 1a- | 1f | 1,086,5 \$ 3,4 | | | | |
| Ö | | - | es 1a-1f | | | | | | |
| Program Service Revenue Contributions, Gifts, Grants | | 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 00 10 11 | | Busn. Co | | | | |
| ven | 2 | a | | | | | | | |
| Re | 1 | | | | | | | | |
| vice | (| | | | | | | | |
| Se | (| d | | | | | | | |
| Tam | | | | | | | | | |
| ō | ' | f All other prog | ram service rever | ue | | | | | |
| <u> </u> | + | | es 2a-2f | | *************************************** | <u> </u> | | | |
| | 3 | | come (including d | ividen | | | | | |
| | ١. | | ilar amounts) | | | | | | 4,309 |
| | 4 | | | | ot bond proceeds | | | | |
| | 5 | Royalties | (0. Re-1 | · · · · · · · · · · · · · · · · · · · | | • | | | |
| | 6- | Cross rente | (i) Real | | (ii) Personal | - | | | |
| | 6a | | | + | | \dashv | | | |
| | b | | | | | \dashv | | | |
| | d | , , | ome or (loss) | | | | | • | |
| | | Gross amount from | (i) Securities | ···· | (ii) Other | | | | |
| | | sales of assets other than inventory | 12, | 100 | (1) 0 110 | - | | | |
| | b | Less: cost or other | | | | | | | |
| | | basis & sales exps. | 10,6 | 509 | | | | | |
| | С | Gain or (loss) | | | | | | | |
| | d | Net gain or (lo | ss) | | | 1,491 | 1,491 | | |
| 0 | 8a | Gross income fro | om fundraising event | s [| | | | | |
| Other Revenue | | (not including \$ | | | | | | | |
| Şe Ke | | of contributions r | eported on line 1c). | | | | | | |
| Ä | | See Part IV, line | | а | | | | | |
| Ě | | | penses | ь | | | | | |
| _ | 1 | | (loss) from fundra | _ | events 🕨 | | | | |
| | 9a | | m gaming activities. | | | | | | |
| | | | 19 | | | | | | |
| | | | penses | b L | | | | | |
| | | | (loss) from gamin | g actr | vities > | | | | |
| | Tua | Gross sales of | · · · · · · · · · · · · · · · · · · · | | | | | | |
| | . | returns and alle Less: cost of g | | a b | | - | | | |
| | | _ | (loss) from sales | | entory > | - | | | |
| | Ų | | ellaneous Revenue | # ################################### | Busn. Code | | | | |
| | 11a | | | | | 147,125 | | | 147,125 |
| | b | * | | | | | | | 171,123 |
| | ç | * | | | | | | | |
| | | | ле | | | | | | |
| | | Total. Add line | . 11 11. | | > | 147,125 | | | |
| | 12 | Total revenue. | See instructions. | | | 1,239,440 | 1,491 | 0 | 151,434 |

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 (A) Total expenses (B) Program service (C) Management and (D) Fundraising Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 138,801 74,767 33,581 30,453 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 204,138 152,559 7 Other salaries and wages 27,050 24,529 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 Payroll taxes 27,021 14,555 6,538 10 5,928 Fees for services (non-employees): a Management Legal 12,680 c Accounting 12,680 Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) Advertising and promotion 12 Office expenses 27,359 3,286 13 10,893 13,180 Information technology 14 Royalties 15 8,084 Occupancy 1,155 3,464 3,465 16 10,501 Travel 6,132 17 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest Payments to affiliates Depreciation, depletion, and amortization 54,631 42,385 12,246 22 Insurance 23 Other expenses. Itemize expenses not covered 24 above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Joint Ministry Support 827,327 827,327 Banquet and Event 7,296 7,296 3,408 In-Kind Expense 3,408 1,944Telephone 833 278 833 All other expenses 650 633 1,323,840 1,116,894 25 Total functional expenses. Add lines 1 through 24e 116,903 90,043 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 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 (B) (A) Beginning of year End of year 50 10,050 1 Cash-non-interest bearing 82,302 70,077 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 2,882 1,667 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Complete Part II of Schedule L 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 8 Inventories for sale or use Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or 2,387,781 other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 1,484,285 1,468,762 10c 110,057 106,745 Investments—publicly traded securities 11 11 Investments—other securities. See Part IV, line 11 12 12 Investments—program-related. See Part IV, line 11 13 13 14 Intangible assets -40,639 -17,210 Other assets. See Part IV, line 11 15 1,658,926 1,620,102 16 Total assets. Add lines 1 through 15 (must equal line 34) 13,377 16,242 17 Accounts payable and accrued expenses 17 Grants payable 18 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 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 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 139,779 150,845 of Schedule D 153,156 167,087 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 1,633,204 1,272,737 Unrestricted net assets -203,084 104,628 Temporarily restricted net assets 28 75,650 75,650 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ complete lines 30 through 34. 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 1,453,015 1,505,770 Total net assets or fund balances 33 1,620,102 1,658,926 Total liabilities and net assets/fund balances

Form **990** (2017)

Schedule O.

the Single Audit Act and OMB Circular A-133?

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

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

Form **990** (2017)

3a

3b

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Name of the organization

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

Employer identification number 1290940 34

| | | | Mission Pos | sible | | | 34-12 | 90940 | | |
|-------|--|---|---|---|---------------|--------------|---------------------------------------|--------------------|--|--|
| Pa | πI | Reas | son for Public Charity | / Status (All organizations | s must c | omplete | e this part.) See instructi | ons. | | |
| The o | rgani | zation is no | t a private foundation becau | ise it is: (For lines 1 through 12, | check or | ly one bo | ox.) | | | |
| 1 | 1 | A church, co | onvention of churches, or as | sociation of churches described | in sectio | on 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 | Ą | communit | y trust described in section | 170(b)(1)(A)(vi). (Complete Par | t II.) | | | | | |
| 9 | Δ | An agricultui | ral research organization de | scribed in section 170(b)(1)(A)(| (ix) opera | ted in cor | njunction with a land-grant coll | ege | | |
| | | r university iniversity: | or a non-land grant college | of agriculture (see instructions). | Enter the | e name, c | sity, and state of the college or | | | |
| 10 | | - , | tion that normally receives: (| 1) more than 33 1/3% of its sup | port from | contribut | ions, membership fees, and g | ross | | |
| | · and and | - | | mpt functions—subject to certain | - | | · · · · · · · · · · · · · · · · · · · | | | |
| | | | | nd unrelated business taxable in | | | | | | |
| | | • | • | 30, 1975. See section 509(a)(2) | | | • | | | |
| 11 | | _ | - | exclusively to test for public saf | • | | | | | |
| 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. | | | | | | | | | |
| | (sound) | | | | | | | | | |
| • | 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 | | | | | | | | | |
| | | | | complete Part IV, Sections A a | | , | | | | |
| k | . | Type II. | A supporting organization su | pervised or controlled in connec | ction with | its suppo | orted organization(s), by having | 1 | | |
| | · | | | rting organization vested in the s | | | | | | |
| | · | organiza | tion(s). You must complete | Part IV, Sections A and C. | | | | | | |
| C | : [| | | supporting organization operated structions). You must complete | | | | vith, | | |
| c | ı [| Type III ı | non-functionally integrated | d. A supporting organization ope | erated in o | connectio | n with its supported organization | on(s) | | |
| | | | | e organization generally must sa | | | | ess | | |
| | · | "າ | | must complete Part IV, Section | | | | | | |
| E |) [| | | eived a written determination from n-functionally integrated support | | | s a Type I, Type II, Type III | | | |
| f | F | | nber of supported organizati | • | ung organ | iizauoii. | | | | |
| 9 | _ | | • • • | ne supported organization(s). | | | | | | |
| | | supported | (ii) EIN | (iii) Type of organization | (iv) is the | organization | (v) Amount of monetary | (vi) Amount of | | |
| | organi | | (-, | (described on lines 1-10 | listed in you | ur governing | support (see | other support (see | | |
| | | | | above (see instructions)) | ļ | ment? | instructions) | instructions) | | |
| | | | | | Yes | No | | | | |
| (A) | | | | | | | | | | |
| (B) | | | | | | | | | | |
| (C) | | | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| | | *************************************** | *************************************** | | ļ | | | | | |
| D) | | | | | | | | | | |
| E) | | | | | | | | | | |
| | | | | | | | | | | |
| otal | | | | | | | | | | |

Schedule A (Form 990 or 990-EZ) 2017

34-1290940

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) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 1,047,558 1,070,701 999,686 819,893 1,086,515 5,024,353 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 1,047,558 1,070,701 999,686 819,893 1,086,515 5,024,353 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) Public support. Subtract line 5 from line 4. 5,024,353 Section B. Total Support Calendar year (or fiscal year beginning in) (c) 2015 (a) 2013 (b) 2014 (e) 2017 (d) 2016 (f) Total Amounts from line 4 1,047,558 1,070,701 999,686 819,893 1,086,515 5,024,353 Gross income from interest, dividends, payments received on securities loans. rents, royalties, and income from similar sources 2,556 4,187 4,919 4,390 4,309 20,361 Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 170,096 115,923 117.714 147,125 672.822 Total support. Add lines 7 through 10 5,717,536 12 Gross receipts from related activities, etc. (see instructions) 12 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 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 14 87.88% Public support percentage from 2016 Schedule A, Part II, line 14 15 87.83% 33 1/3% support test-2017. 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 33 1/3% support test-2016. 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 10%-facts-and-circumstances test-2017. 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 10%-facts-and-circumstances test-2016. 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

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

instructions

Schedule A (Form 990 or 990-EZ) 2017

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.)

| | ction A. Public Support | | | | | | |
|-------|--|-----------------------|----------------------|--|--------------------|---------------|-----------|
| | ndar year (or fiscal year beginning in) | (a) 2013 | (b) 2014 | (c) 2015 | (d) 2016 | (e) 2017 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| 7a | Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| C | Add lines 7a and 7b | | | | | | |
| 8 | Public support. (Subtract line 7c from | | | | | | |
| Sec | line 6.) tion B. Total Support | | | | | | |
| Caler | idar year (or fiscal year beginning in) | (a) 2013 | (b) 2014 | (c) 2015 | (#) 204¢ | (-) 2047 | (O.T. (-) |
| 9 | Amounts from line 6 | (a) 2013 | (8) 2014 | (6) 2013 | (d) 2016 | (e) 2017 | (f) Total |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| b | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | The file of the characteristic states and the characteristic states are the characteristic states and the characteristic states are the characteristic state | | | |
| С | Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, | | | | | | |
| 14 | and 12.) | | | | | () (0) | |
| 14 | First five years. If the Form 990 is for the organization, check this box and stop here | organization's firs | t, secona, third, fo | uπn, or fifth tax yea | r as a section 501 | (c)(3) | |
| Sect | organization, check this box and stop here ion C. Computation of Public Su | pnort Percen | tane | | | | <u>P</u> |
| | Public support percentage for 2017 (line 8, | | | (f) | | 15 | % |
| 16 | Public support percentage from 2016 Sche | dule A. Part III. lir | ne 15 | | | 16 | |
| Sect | ion D. Computation of Investmen | nt Income Per | centage | | | | |
| | Investment income percentage for 2017 (lin | | | . column (f)) | | 17 | % |
| | Investment income percentage from 2016 | | III line 47 | | | 40 | % |
| | 33 1/3% support tests—2017. If the organ | | | 14, and line 15 is i | | | |
| | 17 is not more than 33 1/3%, check this bo | | | | | | ▶ □ |
| | 33 1/3% support tests—2016. If the organ | | | | | | |
| | line 18 is not more than 33 1/3%, check thi | | | | | | ▶ □ |
| | Private foundation. If the organization did | | | | | | |

Schedule A (Form 990 or 990-EZ) 2017 Part IV Supporting Org

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

- Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **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)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? 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).
- 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? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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))? If "Yes," provide detail in **Part VI**.
- 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? If "Yes," provide detail in Part VI.
- 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? If "Yes," provide detail in Part VI.
- 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)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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|----------|--|-----------------|----------------------------|--|
| Pa | rt IV Supporting Organizations (continued) | | | |
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | , | | | |
| | below, the governing body of a supported organization? | 11a | ļ | |
| þ | | 11b | | <u> </u> |
| Soci | | 11c | | <u> </u> |
| Sec | tion B. Type I Supporting Organizations | | T | 1 |
| | | 800000000 | 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? 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. | 4 | | 1 |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported | 1 | | |
| ~ | organization(s) that operated, supervised, or controlled the supporting organization? 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. | 2 | 0000000000000 | |
| Sect | ion C. Type II Supporting Organizations | L L | | .t., |
| | | | 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)? 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). | 1 | | |
| Sect | ion 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? | 1 | | |
| 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? If "No," explain in Part VI how | | | |
| | the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 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? If "Yes," describe in Part VI the role the organization's | | | |
| 4 | supported organizations played in this regard. | 3 | | |
| secti | on E. Type III Functionally-Integrated Supporting Organizations | | | |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction | ns). | | |
| a | The organization satisfied the Activities Test. Complete line 2 below. | | | |
| b | The organization is the parent of each of its supported organizations. Complete line 3 below. | | | |
| С | The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst | ructions). | | |
| 2 4 | official Test. Assessed (b) heless | Г | | |
| | activities Test. Answer (a) and (b) below. | | Yes | No |
| а | 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? 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. | 2a | | |
| b | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more | £-a | | |
| - | of the organization's supported organization(s) would have been engaged in? 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. | 2b | a-pac-9000(1550 0) | 4000 MICHOLOGIA |
| 3 | Parent of Supported Organizations. Answer (a) and (b) below. | | | |
| | 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? Provide details in Part VI. | 3a | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | | | |

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

| Schedule A (Form 990 or 990-EZ) 2017 Mission Possible | 34-1290940 | Page |
|--|---|--|
| Part V Type III Non-Functionally Integrated 509(a)(3) Su | pporting Organizations | |
| 1 Check here if the organization satisfied the Integral Part Test as a qua | lifying 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 |) Current Year (optional) |
| Net short-term capital gain | 1 | |
| Recoveries of prior-year distributions | 2 | |
| 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 |) 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): | | |
| 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): | | |
| 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 | ount, | |
| 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 | C | 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-function | | |
| instructions). | | |

Schedule A (Form 990 or 990-EZ) 2017

| Pa | Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) | | | | | | |
|-----|--|----------------------|--------------------|---|--|--|--|
| Sec | tion D - Distributions | | | Current Year | | | |
| 1 | Amounts paid to supported organizations to accomplish exempt purpo | | | | | | |
| 2 | Amounts paid to perform activity that directly furthers exempt purpose | | | | | | |
| | organizations, in excess of income from activity | | | | | | |
| 3 | Administrative expenses paid to accomplish exempt purposes of supp | orted organizations | | | | | |
| 4 | Amounts paid to acquire exempt-use assets | | | | | | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | | | | | | |
| 6 | Other distributions (describe in Part VI). See instructions. | | | | | | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | | | | |
| 8 | Distributions to attentive supported organizations to which the organizations | ation is responsive | | | | | |
| | (provide details in Part VI). See instructions. | | | | | | |
| 9 | Distributable amount for 2017 from Section C, line 6 | | | | | | |
| 10 | Line 8 amount divided by line 9 amount | | | | | | |
| | | (i) | (ii) | (iii) | | | |
| | Section E - Distribution Allocations (see instructions) | Excess Distributions | Underdistributions | Distributable | | | |
| | | | Pre-2017 | Amount for 2017 | | | |
| 1 | Distributable amount for 2017 from Section C, line 6 | | | | | | |
| 2 | Underdistributions, if any, for years prior to 2017 | | | | | | |
| | (reasonable cause required-explain in Part VI). See | | | | | | |
| | instructions. | | | <u> </u> | | | |
| 3 | Excess distributions carryover, if any, to 2017: | | | | | | |
| а | | | | | | | |
| | From 2013 | | | | | | |
| | From 2014 | | <u> </u> | | | | |
| | From 2015 | | | | | | |
| | From 2016 | | <u> </u> | <u> </u> | | | |
| f | Total of lines 3a through e | | | | | | |
| g | Applied to underdistributions of prior years | | | | | | |
| | Applied to 2017 distributable amount | | | | | | |
| | Carryover from 2012 not applied (see instructions) | | | | | | |
| | Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | | | | |
| 4 | Distributions for 2017 from | | | | | | |
| | Section D, line 7: \$ | | | | | | |
| а | Applied to underdistributions of prior years | | | | | | |
| | Applied to 2017 distributable amount | | | | | | |
| С | Remainder. Subtract lines 4a and 4b from 4. | | | •••••• | | | |
| 5 | Remaining underdistributions for years prior to 2017, if | | | | | | |
| | any. Subtract lines 3g and 4a from line 2. For result | | | | | | |
| | greater than zero, explain in Part VI. See instructions. | | | | | | |
| | Remaining underdistributions for 2017. Subtract lines 3h | | | | | | |
| | and 4b from line 1. For result greater than zero, explain in | | | | | | |
| | Part VI. See instructions. | | | | | | |
| 7 | Excess distributions carryover to 2018. Add lines 3j | | | | | | |
| | and 4c. | | | *************************************** | | | |
| | Breakdown of line 7: | | | | | | |
| | Excess from 2013 | | | | | | |
| | Excess from 2014 | | | | | | |
| | Excess from 2015 | | | | | | |
| | Excess from 2016 | | | | | | |
| е | Excess from 2017 | | | | | | |

Schedule A (Form 990 or 990-EZ) 2017

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ 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.

▶ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

| _ | | | |
|-------|---|---|---------------------------------|
| Mi | ssion Possible | | 34-1290940 |
| Pai | Organizations Maintaining Donor Advised Fu Complete if the organization answered "Yes" on | nds or Other Similar Funds or A Form 990, Part IV, line 6. | Accounts. |
| | | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | | |
| | Aggregate value of contributions to (during year) | | |
| | Aggregate value of grants from (during year) | | |
| | Aggregate value at end of year | | |
| | Did the organization inform all donors and donor advisors in writing that | | |
| | funds are the organization's property, subject to the organization's excl | usive legal control? | Yes No |
| | Did the organization inform all grantees, donors, and donor advisors in | | |
| | only for charitable purposes and not for the benefit of the donor or done | or advisor, or for any other purpose | |
| | conferring impermissible private benefit? | | Yes No |
| Par | **Conservation Easements. Complete if the organization answered "Yes" on I | Form 990 Part IV line 7 | |
| 1 | Purpose(s) of conservation easements held by the organization (check | | |
| | Preservation of land for public use (e.g., recreation or education) | Preservation of a historically impo | ortant land area |
| å | Protection of natural habitat | Preservation of a certified historic | |
| Ï | Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization held a qualified conse | rvation contribution in the form of a conse | rvation |
| | easement on the last day of the tax year. | | Held at the End of the Tax Year |
| a · | Total number of conservation easements | | 2a |
| | Total acreage restricted by conservation easements | | |
| | Number of conservation easements on a certified historic structure incl | | |
| | Number of conservation easements included in (c) acquired after 7/25/ | | |
| ŀ | historic structure listed in the National Register | | 2d |
| | Number of conservation easements modified, transferred, released, ex | | ion during the |
| t | tax year ▶ | | |
| 4 | Number of states where property subject to conservation easement is I | ocated ► | |
| 5 [| Does the organization have a written policy regarding the periodic moni | toring, inspection, handling of | |
| \ | violations, and enforcement of the conservation easements it holds? | | Yes No |
| 6 5 | Staff and volunteer hours devoted to monitoring, inspecting, handling o | f violations, and enforcing conservation ea | sements during the year |
|) | | | |
| 7 / | Amount of expenses incurred in monitoring, inspecting, handling of viol- | ations, and enforcing conservation easem | ents during the year |
| | > \$ | | |
| 8 [| Does each conservation easement reported on line 2(d) above satisfy t | he requirements of section 170(h)(4)(B)(i) | L; (; |
| | * | | |
| | n Part XIII, describe how the organization reports conservation easeme | · | |
| | palance sheet, and include, if applicable, the text of the footnote to the | organization's financial statements that de | scribes the |
| | organization's accounting for conservation easements. | 14'-A | Starthan A |
| Fall | Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" on F | | imilar Assets. |
| 1a II | f the organization elected, as permitted under SFAS 116 (ASC 958), no | ot to report in its revenue statement and b | alance sheet |
| | vorks of art, historical treasures, or other similar assets held for public | • | |
| р | public service, provide, in Part XIII, the text of the footnote to its financia | al statements that describes these items. | |
| b if | f the organization elected, as permitted under SFAS 116 (ASC 958), to | report in its revenue statement and balan | ce sheet |
| | vorks of art, historical treasures, or other similar assets held for public | • | |
| | public service, provide the following amounts relating to these items: | | |
| | i) Revenue included on Form 990, Part VIII, line 1 | | \$ |
| | W. A A. S. Aladad & Easter COO. Dark V. | | ▶ \$ |
| | the organization received or held works of art, historical treasures, or | | ride the |
| fc | ollowing amounts required to be reported under SFAS 116 (ASC 958) r | elating to these items: | |
| | | | ▶ \$ |
| b A | Assets included in Form 990, Part X | | |

| | art III Organizations Mainteinin | a Callactions of A | 4 Highwigel Te- | | ar Ci-:! ^ | | 1 age |
|-----------|--|---|------------------------|--|----------------------------|--------------|---------------------------------------|
| 25 | art III Organizations Maintainin Using the organization's acquisition, access | | | | | sets (contin | iuea) |
| Ŭ | collection items (check all that apply): | ion, and other records, c | neck any or the long | wing that are a sign | imcant use of its | | |
| a | Public exhibition | d 🗀 Loa | n or exchange progr | rams | | | |
| b | pursur! | | er | | | | |
| c | | <u> </u> | | | | | |
| 4 | Provide a description of the organization's or | ollections and explain ho | w they further the or | ganization's exemp | t purpose in Part | | |
| | XIII. | · | | | , | | |
| 5 | During the year, did the organization solicit of | or receive donations of ar | t, historical treasure | s, or other similar | | | |
| | assets to be sold to raise funds rather than t | | of the organization's | collection? | | 🗌 Ye | es 🗌 No |
| P | art IV Escrow and Custodial Arr | | | | | | |
| | Complete if the organization | n answered "Yes" or | Form 990, Part | IV, line 9, or re | ported an amo | unt on Forn | n |
| | 990, Part X, line 21. | | | | | | |
| 1a | Is the organization an agent, trustee, custodi | an or other intermediary | for contributions or e | other assets not | | F=-', | parary. |
| | | | | | | Ye | s No |
| b | If "Yes," explain the arrangement in Part XIII | and complete the following | ng table: | | | | |
| | | | | | | Amoun | <u>t</u> |
| С. | Beginning balance | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | 1c | | ···· |
| | Additions during the year | | | | 1d | | |
| e | , | | | | | | |
| 7 n | Ending balance | 000 D V B 04 | | P. F. 429 + 104 | <u>l_1f_</u> | ["] | |
| | Did the organization include an amount on Foundation of the series of th | | | | | Ye | s No |
| | urt V Endowment Funds. | Check here if the explai | lation has been prov | nded on Part XIII | | | <u> </u> |
| | Complete if the organization | answered "Yes" on | Form 990 Part | IV line 10 | | | |
| | Oomprote ii are organization | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years ba | ock (e) Four | years back |
| 1a | Beginning of year balance | 75,650 | 75,650 | 75,650 | + | | 75,650 |
| | Contributions | | | | | | ,,,,,,, |
| | Net investment earnings, gains, and | | | | | | |
| | losses | 4,204 | 4,206 | 4,560 | 3.4 | 445 | 2,067 |
| d | Grants or scholarships | | | | | | |
| | Other expenditures for facilities and | | | ······································ | | | · · · · · · · · · · · · · · · · · · · |
| | programs | 4,204 | 4,206 | 4,560 | 3,4 | 445 | 2,067 |
| f | Administrative expenses | | | | | | |
| | End of year balance | 75,650 | 75,650 | 75,650 | 75,6 | 550 | 75,650 |
| 2 | Provide the estimated percentage of the curre | ent year end balance (lin | e 1g, column (a)) he | ld as: | | | |
| | Board designated or quasi-endowment | % | | | | | |
| b | Permanent endowment ► 100.00 % | | | | | | |
| C | Temporarily restricted endowment ▶ | % | | | | | |
| | The percentages on lines 2a, 2b, and 2c shou | | | | | | |
| 3a | Are there endowment funds not in the posses | sion of the organization | that are held and ad | ministered for the | | | |
| | organization by: | | | | | ` | Yes No |
| | (i) unrelated organizations | | | | | 3a(i) | X |
| | (ii) related organizations | | | | | 3a(ii) | X |
| D | if "Yes" on line 3a(ii), are the related organiza | tions listed as required o | n Schedule R? | | | 3b | |
| | Describe in Part XIII the intended uses of the | | nt funds. | ············ | | | ····· |
| | t VI Land, Buildings, and Equip | | E. 000 B 44 | | | | |
| | Complete if the organization | ſ | | | | | |
| | Description of property | (a) Cost or other basis (investment) | (b) Cost or other | 1 | Accumulated epreciation | (d) Book va | alue |
| 1. | Lond | (sivestment) | (other) | | predation | 2.0 | c 007 |
| 18 | Land | | 1,675 | 720 | 622 012 | | 6,007 |
| ņ | Buildings | | 1,0/5 | ,,140 | 622,012 | 1,05 | <u>3,708</u> |
| | Leasehold improvements | | 210 | ,193 | 284 004 | <u> </u> | 4 000 |
| | Equipment Other | | | ,861 | 284,094 12,913 | <u></u> | 4,099 4,948 |
| | Other Add lines 1a through 1e. (Column (d) must eq | ual Form 990 Part Y or | . | , oot | | | |
| · Viai, | riod intes to unough te. (Column (a) must eq | uai FUIIII 990, Pail 人, CC | narim (B), line 10c.) | | | 1,40 | 8,762 |

| Schedule D (Form 990) 2017 MISSION POSSIBLE | | 34-1290940 | Page |
|---|---------------------------------------|---|--|
| Part VII Investments—Other Securities. | | | |
| Complete if the organization answered "Yes" or | n Form 990, Part IV, Iir | ne 11b. See Form 990, Pa | rt X, line 12. |
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of va Cost or end-of-year n | |
| (1) Financial derivatives | | | |
| (2) Closely-held equity interests | | | |
| (3) Other | | | |
| (A) | | | |
| (B) | | | |
| (C) | | | |
| (D) | | | |
| (E) | | | |
| <u>(F)</u> | | | |
| (G) | | | |
| (H) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶ | | <u> </u> | |
| Part VIII Investments—Program Related. | - Farm 000 Dad N/ iin | - 44- O F 000 D | . V. K 40 |
| Complete if the organization answered "Yes" on (a) Description of investment | | | |
| (a) Description of investment | (b) Book value | (c) Method of val. Cost or end-of-year m | |
| (4) | | Cost of end-of-year in | arket value |
| (1) (2) | | | |
| (3) | | | |
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| (6) | | | |
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| (8) | | | |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶ | | | |
| Part IX Other Assets. | | | |
| Complete if the organization answered "Yes" on | Form 990, Part IV, line | <u>e 11d. See Form 990, Parl</u> | t X, line 15. |
| (a) Description | | · · · · · · · · · · · · · · · · · · · | (b) Book value |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) (6) | | | |
| (7) | | | |
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| (9) | | | |
| otal. (Column (b) must equal Form 990, Part X, col. (B) line 15.) | · · · · · · · · · · · · · · · · · · · | • | |
| Part X Other Liabilities. | | | |
| Complete if the organization answered "Yes" on | Form 990, Part IV, line | e 11e or 11f. See Form 99 | 0, Part X, |
| line 25. | (h) Daah salsa | | |
| . (a) Description of liability (1) Endorship pome taxon | (b) Book value | | |
| (1) Federal income taxes (2) Canadian Interest in J. M. Assets | 150,845 | | |
| (3) | 10,640 | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| | | | |

150,845

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

^{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 D (F | orm 990) 2017 | Mission 1 | Possible | | | 34-1290940 | Page 5 |
|-------------------|---|---|-------------------------------------|---|---|---|---|
| Part XIII | Suppleme | ntal Information | n (continued) | | | | |
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SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990.

2017

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

OMB No. 1545-0047

| | Mission Possible | 34-1290940 |
|--------|---|------------------------------|
| Part I | General Information on Activities Outside the United States. Complete if the or | ganization answered "Yes" or |
| | Form 990, Part IV, line 14b. | |
| | | |

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

| 000000 | 64464464666666 | answer of the contract of the | 100 1 | . 63 0 | J: 1 | |
|--------|----------------|---|-------------|--------|------|---|
| | | Form 990, Part IV, line 14b. | | | | |
| 1 | For gran | tmakers. Does the organization maintain records to substantiate the amount of its grants and other | | | | |
| | assistan | e, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the | | | | |
| | grants or | assistance? | . [] | Yes | X | N |
| 2 | For gran | tmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other | | | | |
| | | re outside the United States. | | | | |

(b) Number of offices in the (a) Region (e) If activity listed in (d) is (c) Number of (d) Activities conducted in the (f) Total employees, agents, and region (by type) (such as, a program service, expenditures for region fundraising, program services, investments, grants to recipients describe specific type of and investments independent service(s) in the region in the region contractors located in the region) in the region Central America and the Carribbean (1) 251 Program Services Feeding/Schooling 1,116,894 (2)

| (3) | | | | |
|--|---|-----|--|-----------|
| (4) | | | | |
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| (13) | | | | |
| (14) | | | | |
| (15) | | | | |
| (16) | | | | |
| (17) | | | | |
| 3a Sub-total | 8 | 251 | | 1,116,894 |
| b Total from continuation sheets to Part I | | | | |

251

1,116,894

c Totals (add

Schedule F (Form 990) 2017 Mission Possible

Part II

34-1290940

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990,

Page 2

Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

| A | | | | יום מיין מיין מיין מיין מיין מיין מיין מיי | מממוווחוומו אלומי | ים ומבחבת. | | |
|--------------|-----------------|------------|--|--|----------------------|--|---|--|
| organization | (b) IRS code | (c) Region | (d) Purpose of | (e) Amount of | (f) Маплет оf | (g) Amount of | (h) Description | (i) Method of valuation |
| | (if applicable) | | טומון | cash grant | cash disbursement | noncash assistance | of noncash assistance | (book, FMV, appraisal, other) - |
| (1) | | | T TOTAL COLUMN TO THE PROPERTY OF THE PROPERTY | | | - TOTAL CONTROL CONTRO | | |
| (2) | | | TOTAL STATE OF THE | | | | | , The state of the |
| (3) | | | THE PROPERTY OF THE PROPERTY O | | | 110111111111111111111111111111111111111 | 11.11.11.11.11.11.11.11.11.11.11.11.11. | |
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| (16) | | | Andrew Artenna | | | | | 774 |
| | | | | | | | | |

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 ~

Enter total number of other organizations or entities

Schedule F (Form 990) 2017

1227 01/07/2019 1:42 PM

Schedule F (Form 990) 2017 Mission Possible PartIII

34-1290940

Page 3 Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

(h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2017 (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement (d) Amount of cash grant Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance (b) Region (c) Number of recipients 33 (14) (15) Ξ ව € <u>@</u> 9 5 <u>=</u> (12) 9 (18) 8 8 (6) 3 2

| P | art IV Foreign Forms | | , age |
|---|--|---------|-------|
| _ | | | |
| 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 | (mm) | (88) |
| | Corporation (see Instructions for Form 926) | Yes | X No |
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization | | |
| | may be required to 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 | X No |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," | | |
| | the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To | | |
| | Certain Foreign Corporations (see Instructions for Form 5471) | Yes | X No |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a | | |
| | qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, | | |
| | Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing | | |
| | Fund (see Instructions for Form 8621) | Yes | X No |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," | | |
| | the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain | | |
| | Foreign Partnerships (see Instructions for Form 8865) | Yes | X No |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? If | | |
| | "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see | | |
| | Instructions for Form 5713; don't file with Form 990) | Yes | X No |
| | , | [_] 103 | 140 |

Schedule F (Form 990) 2017

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 3 - Activities per Region | 1 | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
|--|--------------------|---|
| Region | Expenditures Inves | tments |
| Central America and the Carribbean | \$ 1,116,894 \$ | 0 |
| | | |
| Part V - Additional Information | •••••• | |
| Prepared in accordance with U.S. GAAP. | | |
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SCHEDULE O (Form 990 or 990-EZ)

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.

2017

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Mission Possible

Form 990 - Organization's Mission

pastor and teacher training and evangelism.

Employer identification number 34-1290940

Mission Possible, in cooperation with Mission Possible Canada, owns and operates eight schools in Haiti and the Dominican Republic. It provides Christian education, evangelism, feeding programs, and discipleship training. Another focus is Leadership Development: student leadership training, pastor seminars for pastors and lay people, and teacher seminars for private and public school teachers. Mission Possible sends short-term mission teams into these countries for construction, medical missions,

Form 990, Part I, Line 6

Many individuals volunteer their time and perform a variety of tasks that assist the Organization.

Form 990, Part V, Line 4b - Financial Accounts in Foreign Countries Haiti, Dominican Republic

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
Board members each review the completed Form 990 and, if any
modifications are suggested by board members, they will be reviewed and
changed if necessary.

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

Employees and Board members are queried every year concerning conflict of interest. The organization then monitors its activity to notice

Schedule O (Form 990 or 990-EZ) (2017)

| Form 990, Part VI, Line 15a - Compensation Process for Top Official The Organization monitors local compensation trends based upon like organization's compensation offerings. The Presidents salary is determine by the board and all others are determined by the President. Form 990, Part VI, Line 15b - Compensation Process for Officers Same as 15a. Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Financial information and other documents are available by request throug the office. Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation Transfer of Capital Assets per Joint Ministry Agre \$ 28,621 Change in Community Foundation \$ 461 Total \$ 29,082 | Name of the organization Mission Possible | Employer ide 34 - 129 | entification number 90940 |
|---|---|--------------------------|---|
| The Organization monitors local compensation trends based upon like organization's compensation offerings. The Presidents salary is determined by the board and all others are determined by the President. Form 990, Part VI, Line 15b - Compensation Process for Officers Same as 15a. Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Financial information and other documents are available by request through the office. Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation Transfer of Capital Assets per Joint Ministry Agre \$ 28,621 Change in Community Foundation \$ 461 | disobedience of conflict policy compliance. | | |
| organization's compensation offerings. The Presidents salary is determined by the board and all others are determined by the President. Form 990, Part VI, Line 15b - Compensation Process for Officers Same as 15a. Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Financial information and other documents are available by request throug the office. Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation Transfer of Capital Assets per Joint Ministry Agre \$ 28,621 Change in Community Foundation \$ 461 | Form 990, Part VI, Line 15a - Compensation Process for | Top Off: | icial |
| by the board and all others are determined by the President. Form 990, Part VI, Line 15b - Compensation Process for Officers Same as 15a. Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Financial information and other documents are available by request throug the office. Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation Transfer of Capital Assets per Joint Ministry Agre \$ 28,621 Change in Community Foundation \$ 461 | The Organization monitors local compensation trends bas | ed upon | like |
| Form 990, Part VI, Line 15b - Compensation Process for Officers Same as 15a. Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Financial information and other documents are available by request throug the office. Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation Transfer of Capital Assets per Joint Ministry Agre \$ 28,621 Change in Community Foundation \$ 461 | organization's compensation offerings. The Presidents s | alary is | determined |
| Same as 15a. Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Financial information and other documents are available by request throug the office. Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation Transfer of Capital Assets per Joint Ministry Agre \$ 28,621 Change in Community Foundation \$ 461 | by the board and all others are determined by the Presi | dent. | |
| Financial information and other documents are available by request through the office. Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation Transfer of Capital Assets per Joint Ministry Agre \$ 28,621 Change in Community Foundation \$ 461 | | Officers | 3 |
| the office. Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation Transfer of Capital Assets per Joint Ministry Agre \$ 28,621 Change in Community Foundation \$ 461 | Form 990, Part VI, Line 19 - Governing Documents Disclo | sure Exp | lanation |
| Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation Transfer of Capital Assets per Joint Ministry Agre \$ 28,621 Change in Community Foundation \$ 461 | Financial information and other documents are available | by requ | est through |
| Transfer of Capital Assets per Joint Ministry Agre \$ 28,621 Change in Community Foundation \$ 461 | the office. | | |
| Change in Community Foundation \$ 461 | | | |
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| rotai \$ 29,082 | | | |
| | Total | \$ | 29,082 |
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| Page 1 of 1 | | Page 1 | of 1 |

DAA

Form 4562

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.

Department of the Treasury Internal Revenue Service Name(s) shown on return

Mission Possible

Identifying number

34-1290940 Business or activity to which this form relates Indirect Depreciation **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) 510,000 1 Total cost of section 179 property placed in service (see instructions) 2 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,030,000 3 3 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (b) Cost (business use only) 6 Listed property. Enter the amount from line 29 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the smaller of line 5 or line 8 9 9 Carryover of disallowed deduction from line 13 of your 2016 Form 4562 10 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 13 Carryover of disallowed deduction to 2018. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) Property subject to section 168(f)(1) election 15 15 63,568 Other depreciation (including ACRS) MACRS Depreciation (Don't include listed property.) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2017 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B--Assets Placed in Service During 2017 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (business/investment use (a) Classification of property (e) Convention (f) Method placed in (g) Depreciation deduction period service only-see instructions) 19a 3-year property b 5-year property 7-year property d 10-year property 15-year property 20-year property 25-year property 25 yrs. Residential rental S/L 27.5 yrs. MM property MM S/L 27.5 yrs. MM Nonresidential real 39 yrs. S/L property MM S/L Section C—Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs. S/L 40-year 40 yrs. S/L Part IV Summary (See instructions.) Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 63,568 here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

Form **990**

Name

Two Year Comparison Report

2016 & 2017

For calendar year 2017, or tax year beginning

07/01/17

, ending 06/30/18

Taxpayer Identification Number

| 1 | ۱i. | ssion Possible | | | 3 | 4-1 | 1290940 |
|--------|-----|---|-----|-----------|--------|-----|-------------|
| | | | | 2016 | 2017 | | Differences |
| | 1. | Contributions, gifts, grants | 1. | 819,893 | 1,086, | 515 | 266,622 |
| | | Membership dues and assessments | 2. | | | | |
| | 3. | Government contributions and grants | 3. | | | | |
| e n | 4. | Program service revenue | 4. | | | | |
| = | 5. | Investment income | 5. | 4,390 | 4, | 309 | -81 |
| > | 6. | Proceeds from tax exempt bonds | 6. | | | | |
| R e | | Net gain or (loss) from sale of assets other than inventory | 7. | -248 | 1, | 491 | 1,739 |
| | 8. | Net income or (loss) from fundraising events | 8. | | | | |
| | | Net income or (loss) from gaming | 9. | | | | |
| | | Net gain or (loss) on sales of inventory | 10. | | | | |
| | | Other revenue | 11. | 121,964 | 147, | 125 | 25,161 |
| | 12. | Total revenue. Add lines 1 through 11 | 12. | 945,999 | 1,239, | 440 | 293,441 |
| | 13. | Grants and similar amounts paid | 13. | | | | |
| | | Benefits paid to or for members | 14. | | | | |
| (V) | 15. | Compensation of officers, directors, trustees, etc. | 15. | 121,243 | 138, | 801 | 17,558 |
| ŝ | 16. | Salaries, other compensation, and employee benefits | 16. | 190,031 | 231, | 159 | 41,128 |
| e | 17. | Professional fundraising fees | 17. | | | | |
| | | Other professional fees | 18. | 12,328 | 12, | 680 | 352 |
| | 19. | Occupancy, rent, utilities, and maintenance | 19. | 10,295 | | 084 | -2,211 |
| | 20. | Depreciation and Depletion | 20. | 45,691 | 54, | 631 | 8,940 |
| | | Other expenses | 21. | 734,541 | 878, | 485 | 143,944 |
| | 22. | Total expenses. Add lines 13 through 21 | 22. | 1,114,129 | 1,323, | 840 | 209,711 |
| | 23. | Excess or (Deficit). Subtract line 22 from line 12 | 23. | -168,130 | -84, | 400 | 83,730 |
| | | Total exempt revenue | 24. | 945,999 | 1,239, | 440 | 293,441 |
| | 25. | Total unrelated revenue | 25. | | | | |
| ion | 26. | Total excludable revenue | 26. | 126,106 | 152, | | 26,819 |
| nat | 27. | Total assets | 27. | 1,658,926 | | 102 | -38,824 |
| Į. | 28. | Total liabilities | 28. | 153,156 | | | 13,931 |
| ٥ | 29. | Retained earnings | 29. | 1,505,770 | | 115 | -52,755 |
| ē | 30. | Number of voting members of governing body | 30. | 16 | 12 |] | |
| | | Number of independent voting members of governing body | 31. | 14 | 12 | | |
| | 32. | Number of employees | 32. | 12 | 11 | | |
| | 33. | Number of volunteers | 33. | 178 | 170 | T | |

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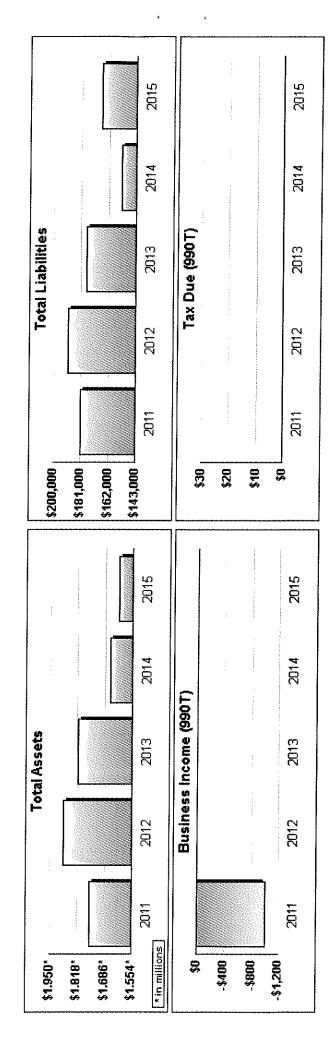
| Form 990 | | Tax R | Tax Return History | | | 2017 |
|-----------------------------------|-----------|-----------|--------------------|-----------|----------------|--|
| Name Mission Po | Possible | | | | Employe 34 - 3 | Employer Identification Number 34-1290940 |
| ' | 2013 | 2014 | 2015 | 2016 | 2017 | 0.000 |
| Contributions, gifts, grants | 1,047,558 | 1,070,701 | 989,686 | 819,893 | 1,086,515 | 2010 |
| Membership dues | | | | | | - 3 |
| Program service revenue | | | | | | |
| Capital gain or loss | -3,311 | 105 | 8,605 | -248 | 1.491 | *************************************** |
| Investment income | 2,556 | 4,187 | 4,919 | 4,390 | 4.309 | |
| Fundraising revenue (income/loss) | | | | | . | |
| Gaming revenue (income/loss) | | | | | | |
| Other revenue | 170,096 | 115,923 | 117,714 | 121.964 | 147.125 | |
| Total revenue | 1,216,899 | 1,190,916 | 1,130,924 | 945,999 | | |
| Grants and similar amounts paid | | | | | | |
| Benefits paid to or for members | | | | | | |
| Compensation of officers, etc. | 153,946 | 155,716 | 160,856 | 121,243 | 138.801 | |
| Other compensation | 121,444 | 104,413 | 165,845 | • • | 231.159 | |
| Professional fees | 12,424 | 12,600 | 12,206 | 12,328 | 12.680 | |
| Occupancy costs | 4,300 | 3,746 | 6,170 | | | |
| Depreciation and depletion | 47,848 | 44,483 | 38,881 | 45,691 | 54.631 | |
| Other expenses | 823, | 777, | 906,802 | 734,541 | | |
| Total expenses | - 1 | ~ | 1,290,760 | 1,114,129 | 1,323,840 | TANKS MARKET MAR |
| Excess or (Deficit) | 53,657 | 92,775 | -159,836 | -168,130 | ·[] | |
| F | 7 7 7 | | | | 1 | |
| l otal exempt revenue | 1,216,899 | 1,190,916 | 1,130,924 | 945,999 | 1,239,440 | |
| Total unrelated revenue | | | | | | |
| Total excludable revenue | 169, | 120, | 131,238 | 126,106 | 152,925 | |
| Total Assets | | 7 | 1,814,974 | 1,658,926 | 1,620,102 | THE REAL PROPERTY OF THE PERSON OF THE PERSO |
| Total Liabilities | | 18 | 177,242 | 153,156 | 167,087 | |
| Net Fund Balances | 1,579,615 | 1,693,111 | 1,637,732 | 1,505,770 | 1,453,015 | |

ŧ «

| Form 990T | | Table 1. | Tax Retu | Tax Return History | | | | | 2017 |
|--|--|----------|----------|--------------------|------|---|---|------------------|---|
| Name Mission | Possible | | | | | | | Employer 34-1; | Employer Identification Number 34 - 1290940 |
| | 2013 | 2014 | 4 | 2015 | | 2016 | 2017 | 21 | 2018 |
| Business activity profit/loss | | | | | | | | | |
| Capital gains/losses Partner and S Corp pain/loss | | | | | | | | | |
| Rental income* | | | | | | | | | |
| Debt-financed income* | | | | | | | | | |
| Controlled organizations income/interest* | *** | | | | | | | | |
| Investment income, specific organizations* | | | | | | 7,714111111 | | | *************************************** |
| Exploited exempt activity income* | , | | | | | | | | |
| Other income | | | | | | | | | |
| Total trade or business income. | | | | | | | | | |
| Compensation of officers, ect. | | | | | | | | | |
| Other salaries and wages | | | | | | | | | |
| Repairs and maintenance | | | | | | | | | |
| Bad debts | | | | | | | | | |
| Interest | | | | | | | | | |
| | | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| | | | | | | | | | |
| Depreciation and Depletion | | | | | | | | | |
| Deferred compensation plans | | | | | | | | | |
| Employee benefit programs | | | | | | | | | |
| | | | | | | | | | |
| \$1,155* | Contributions | : | | \$1,313* | ÷ | Exempt R | Exempt Revenue (Loss) | (ss) | |
| \$1.021* | | | | \$1.166* | | 100000000000000000000000000000000000000 | ANT 87 (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| 000'288\$ | | | | 41 D40* | | | | | |
| ¢753 nan | | | | | | | | | |
| 2011 | 2012 2013 | 2014 | 2015 | J 000'Z/88 | 2044 | 2007 | 0000 | 2004 | Lico |
| *************************************** | | t 07 | 2013 | * in millions | | 7117 | 2013 | 2014 | 2015 |
| \$1.380°, | Expenses_Deductions | SU. | | \$0.2 5.00 | | Net Exer | Net Exempt Revenue | e | |
| \$1.267* | | <u></u> | | 095,286 | | | - | | |
| | | | | ₹ | | | | | |
| Control of the Contro | To the state of th | | | -\$92,500 | | | | | |
| \$1.041° 2011 2011 2011 | 2012 2013 | 2014 | 2015 | \$185,000 | 2011 | 2012 | 2013 | 2014 | 2015 |
| | | | | | | | | | |

| Form 990T | | Тах Б | Tax Return History | | | 2017 |
|-------------------------------------|---------|--|---|------|-------|---|
| Name Mission Possible | ossible | THE TAXABLE IN TAXABLE | TOTAL | | Emple | Employer Identification Number |
| | 2013 | 2014 | 2015 | 2016 | 7,000 | , |
| Other deductions | | | | | 1107 | 01.07 |
| Net operating loss deduction | | | | | | |
| Specific deduction | 1,000 | | | | | |
| Income after expense and deductions | -1,000 | | | | | |
| Income tax (corporate or trust) | | | | | | |
| Other taxes | | | | | | |
| Total taxes | | | | | | |
| General business credit | | | | | | |
| Other credits | | | | | | |
| Net tax after credits | | | | | | |
| Estimated tax payments | | | | | | |
| Other payments | | | | | | *************************************** |
| Balance due/Overpayment | | | | | | |
| | | | | | | |

^{*} Income shown net of expenses



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34-1290940

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| Asset | Description | Date In Service | Cost | Bus Sec Basis % 179Bonus for Depr PerConv Meth Prior Current |
|----------|---|---------------------|-----------------|--|
| 71000 | Dogonphon | III OCIVICO | 0031 | 70 170 Dollas Tor Dopr Torodity Modi Trior Outrent |
| Othe | Depreciation: | | | |
| 13 | Lanzac Fans | 7/13/93 | 184 | 184 5 MO S/L 184 0 |
| 14 | Container #1 | 1/23/94 | 900 | 900 5 MO S/L 900 0 |
| 16 19 | Generator Generator #1 Dayspring | 4/30/95 3/27/96 | 301 550 | 301 5 MO S/L 301 0 550 5 MO S/L 550 0 |
| 20 | Other Equipment Haiti | 7/01/90 | 42,672 | 42,672 5 MO S/L 42,672 0 |
| 22 | DR - Jesus Film & Equip. | 5/26/93 | 1,814 | 1,814 5 MO S/L 1,814 0 |
| 23 24 | Sewing Machines MPCA | 6/10/99 | 847 | 847 5 MO S/L 847 0 916 5 MO S/L 916 0 |
| 29 | Ebenezer Desks Degeance Propane Burners | 1/13/99 12/31/00 | 916 745 | 916 5 MO S/L 916 0 745 5 MO S/L 745 0 |
| 30 | MPCA Sewing Machines | 2/28/01 | 1,142 | 1,142 5 MO S/L 1,142 0 |
| 31 | MPCA Generator shipping costs | 4/23/01 | 1,041 | 1,041 5 MO S/L 1,041 0 |
| 32 33 | Lanzac MC Generator shipping costs AC unit 1st floor | 4/23/01 6/29/01 | 1,041 538 | 1,041 5 MO S/L 1,041 0 538 5 MO S/L 538 0 |
| 34 | Computer | 1/24/01 | 1,008 | 1,008 5 MO S/L 1,008 0 |
| 35 | MPCA Generator | 4/23/01 | 5,900 | 5,900 5 MO S/L 5,900 0 |
| 36 37 | Lanzac MC Generator MPCA Wall\Gate | 4/23/01 1/30/98 | 5,901 8,741 | 5,901 5 MO S/L 5,901 0 8,741 30 MO S/L 5,658 291 |
| 38 | Dupin Bldg | 2/17/98 | 16,600 | 16,600 30 MO S/L 3,038 291 16,600 30 MO S/L 10,698 553 |
| 39 | Dupin Fence | 2/17/98 | 2,821 | 2,821 7 MO S/L 2,821 0 |
| 40 | Lanzac Rachel Inn | 8/30/98 | 666 | 666 30 MO S/L 418 22 |
| 41 42 | Lanzac Workshop Chardene Buildings | 8/30/98 6/01/99 | 6,372 38,332 | 6,372 30 MO S/L 4,000 212 38,332 30 MO S/L 23,106 1,278 |
| 43 | Ebenezer Filter Well | 7/14/98 | 1,116 | 1,116 30 MO S/L 707 37 |
| 44 | Ebenezer Bathroom | 7/31/98 | 766 | 766 30 MO S/L 483 26 |
| 45 46 | Ebenezer Construction Lanzac River Wall | 9/30/98 2/17/00 | 8,050 3,596 | 8,050 30 MO S/L 5,031 269 3,596 30 MO S/L 2,078 120 |
| 47 | Lanzac School Grounds | 9/30/99 | 1,365 | 1,365 30 MO S/L 808 45 |
| 48 | MPCA MP Boutique | 3/31/00 | 3,564 | 3,564 30 MO S/L 2,049 119 |
| 49 50 | Chardene Wall/Fencing Chardene School Grounds | 1/31/00 5/31/00 | 3,071 | 3,071 30 MO S/L 1,783 102 2,201 30 MO S/L 1,253 74 |
| 52 | Chardene Bldg #1 Lower Bldg | 9/30/99 | 2,201 1,700 | 2,201 30 MO S/L 1,253 74 1,700 30 MO S/L 1,006 57 |
| 53 | Lanzae MC Bldg #3 | 9/30/99 | 2,314 | 2,314 30 MO S/L 1,369 77 |
| 54 | Ebenezer 2nd Bldg 2nd Story | 11/30/99 | 5,110 | 5,110 30 MO S/L 2,995 170 |
| 55 56 | Chardene Buildings Chardene Basketball Court | 12/31/00 9/30/00 | 3,233 489 | 3,233 30 MO S/L 1,778 108 489 30 MO S/L 273 17 |
| 57 | Lanzac Seawall | 11/30/00 | 2,408 | 2,408 30 MO S/L 1,331 80 |
| | Lanzac Security Lighting/Walls | 4/30/01 | 3,156 | 3,156 7 MO S/L 3,156 0 |
| 59 60 | First Floor Restroom - 2nd bldg. 2nd Floor - 2nd bldg. EBE | 6/30/01 6/30/01 | 1,113 36,998 | 1,113 7 MO S/L 1,113 0 36,998 30 MO S/L 19,732 1,233 |
| 62 | Basketball court 2nd half | 6/30/01 | 2,587 | 2,587 30 MO S/L 1,380 86 |
| 63 | Romans 12 Construction | 1/01/97 | 2,013 | 2,013 30 MO S/L 1,409 67 |
| 64 65 | Lanzac Sidewalk Dental Clinic Improvement | 1/01/97 1/01/97 | 73 138 | 73 30 MO S/L 50 2 138 30 MO S/L 98 4 |
| | Lanzac Riverwall | 1/01/97 | 1,105 | 1,105 30 MO S/L 774 37 |
| | Lanzac School | 1/01/97 | 1,199 | 1,199 30 MO S/L 839 40 |
| | Lanzac Workshop Rachels Inn | 1/01/97 1/01/97 | 490 | 490 30 MO S/L 342 17 4,578 30 MO S/L 3,245 153 |
| | Lanzac SC.Fence | 1/01/97 | 4,578 990 | 4,578 30 MO S/L 3,245 153 990 30 MO S/L 693 33 |
| 71 | Shower House | 1/01/97 | 2,889 | 2,889 30 MO S/L 2,022 96 |
| | Laundry | 1/01/97 | 334 | 334 30 MO S/L 234 11 |
| | Dupin Construction Building - 3rd House | 1/01/97 1/01/96 | 13,249 1,636 | 13,249 30 MO S/L 9,275 442 1,636 30 MO S/L 1,198 55 |
| 75 | MC Gate and Arch | 1/01/96 | 905 | 905 30 MO S/L 663 30 |
| | Lanzac School | 1/01/96 | 13,425 | 13,425 30 MO S/L 9,852 448 |
| | Ebenezer Building #2 Ebenezer Grounds | 6/30/97 6/30/97 | 5,144 645 | 5,144 30 MO S/L 3,429 172 645 30 MO S/L 430 22 |
| | Lanzac Construction | 6/30/94 | 2,748 | 2,748 30 MO S/L 2,107 91 |
| | Lanzac Electricity | 6/30/93 | 1,000 | 1,000 30 MO S/L 786 34 |
| | Lanzac Building Improvements MPCA Construction | 6/30/93 6/30/94 | 9,011 2,712 | 9,011 30 MO S/L 7,209 300 2,712 30 MO S/L 2,079 91 |
| | Lanzac Kitchen | 5/01/95 | 1,769 | 1,769 30 MO S/L 2,079 91 |
| 84 | Mission Center Gate | 3/31/95 | 157 | 157 30 MO S/L 157 0 |
| | Dupin Roof/Floors/Desk Chardene Improvements | 2/01/95 5/01/95 | 3,449 564 | 3,449 30 MO S/L 2,577 115 564 30 MO S/L 417 19 |
| | Building Lanzac | 7/01/90 | 9,439 | 9,439 30 MO S/L 9,439 0 |
| 88 | Building Chardene | 7/01/90 | 6,264 | 6,264 30 MO S/L 6,264 0 |
| | Building Degeance | 7/01/90 7/01/90 | 2,362 83,093 | 2,362 30 MO S/L 2,362 0 83,093 30 MO S/L 83,093 0 |
| 71 | Building MTC | 1101170 | 05,093 | 0 CEO''C 7'' O'' O' CEO''CO |

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| \ \ | Description | Date | 04 | Bus Sec | Basis | DarCony Moth | Duine | Overant |
|------------|--|---------------------|-------------------|-------------------|-----------------|---------------------------|-----------------|------------------|
| Asset | | In Service | Cost | <u>%</u> 179Bonus | | PerConv Meth 30 MO S/L | Prior | Current 0 |
| 92 93 | Capital Improvements DR - Building Ebenezer | 7/01/90 7/01/90 | 19,031 2,040 | | 19,031 2,040 | | 19,031 2,040 | 0 |
| 94 | DR - Building Ebenezer 2 | 6/23/98 | 8,993 | | 8,993 | | 5,696 | 300 |
| | Lanzac Mission Center | 4/30/98 | 12,272 | | 12,272 | | 7,840 | 409 |
| 100 | Wells Cargo Trailer Nissan UR Van/Bus 1990 | 11/23/94 7/01/90 | 1,500 22,500 | | 1,500 22,500 | | 1,500 22,500 | 0 |
| 101 | GMC Truck 1986 | 7/01/90 | 15,837 | | 15,837 | | 15,837 | ő |
| | Hilux Pickup | 1/01/99 | 2,415 | | 2,415 | 5 MO S/L | 2,415 | 0 |
| 103 | Toyota Pickup | 1/01/99 | 22,100 | | 22,100 | | 22,100 | 0 |
| 104 | Lanzac 3rd House Bunk Bed Dorm Mattresses Lanzac | 4/30/94 5/31/93 | 215 163 | | 215 163 | 5 MO S/L 5 MO S/L | 215 163 | 0 |
| 105 | Desks Haiti | 6/09/93 | 722 | | 722 | | 722 | ŏ |
| 107 | School Desk Construction | 6/30/94 | 267 | | 267 | 5 MO S/L | 267 | 0 |
| 108 | School Desk Lumber | 6/30/94 6/30/94 | 1,807 361 | | 1,807 361 | 5 MO S/L 5 MO S/L | 1,807 361 | 0 |
| 109 110 | School Desk Steel Lanzac Mattresses | 4/17/95 | 1,224 | | 1,224 | 5 MO S/L 5 MO S/L | 1,224 | 0 |
| iii | Steel Chairs 4 | 4/30/95 | 56 | | 56 | 5 MO S/L | 56 | 0 |
| 112 | MPCA Desks and Seats | 6/30/95 | 718 | | 718 | 5 MO S/L | 718 | 0 |
| 113 | School Furniture and Fixtures Haiti Mattress | 7/01/90 6/01/96 | 355 302 | | 355 302 | 5 MO S/L 5 MO S/L | 355 302 | 0 |
| į. | Furniture & Fixtures | 6/30/90 | 15,994 | | 15,994 | 5 MO S/L | 15,994 | ŏ |
| 116 | Dupin Kitchen Propane Burners | 7/01/99 | 477 | | 477 | 5 MO S/L | 477 | 0 |
| 117 | Land Lanzac | 1/30/87 | 120,000 | | 120,000 | 0 Land | 0 | 0 |
| 118 119 | Land MTC Lanzac River Walk Embankment\ | 6/15/83 6/30/95 | 36,000 3,970 | | 36,000 3,970 | 0 Land 30 MO S/L | 0 2,911 | 0 133 |
| 120 | Dupin Land | 1/01/97 | 3,387 | | 3,387 | 0 Land | 0 | 0 |
| 121 | Land Lanzac | 1/01/97 | 3,622 | | 3,622 | 0 Land | 0 | 0 |
| 122 | Land Chardene | 6/30/91 | 500 | | 500 | 0 Land 0 Land | 0 | $0 \\ 0$ |
| 123 124 | Land Lanzac Land River | 6/30/91 6/30/91 | 4,359 400 | | 4,359 400 | 0 Land 0 Land | 0 | 0 |
| 128 | Lanzac MC Land | 5/31/00 | 12,584 | | 12,584 | 0 Land | ŏ | 0 |
| 133 | Ebenezer Basketball Court | 6/30/02 | 2,185 | | 2,185 | 30 MO S/L | 1,092 | 73 |
| | Ebenezer Perimeter Wall | 6/30/02 6/30/02 | 3,890 2,276 | | 3,890 2,276 | | 1,945 1,138 | 130 76 |
| | 2nd Building Improvements Lanzac Mission Center Office/Residence | 6/30/02 | 18,693 | | 18,693 | | 9,346 | 623 |
| 137 | Lanzac Seawall | 6/30/02 | 672 | | 672 | 30 MO S/L | 336 | 22 |
| | LaHatte School Building | 6/30/02 | 20,275 | | 20,275 | 30 MO S/L | 10,137 | 676 |
| | Vehicle Accessories Ebenezer Perimeter Wall | 6/30/02 6/30/03 | 1,494 1,045 | | 1,494 1,045 | 7 MO S/L 30 MO S/L | 1,494 488 | 0 34 |
| | 2nd Bldg Improvements | 6/30/03 | 1,077 | | 1,077 | | 503 | 36 |
| | Toilet - Orphanage/Boutique | 6/30/03 | 1,370 | | | 30 MO S/L | 639 | 46 |
| | Lanzac Mission Center Imp Lanzac Seawall | 6/30/03 6/30/03 | 2,889 1,999 | | 2,889 1,999 | 30 MO S/L 30 MO S/L | 1,348 933 | 97 6 6 |
| | LaHatte School Building | 12/31/02 | 11,988 | | 11,988 | 30 MO S/L | 5,794 | 400 |
| 148 | Dupin Land Survey/Legal Costs | 6/30/03 | 299 | | 299 | 30 MO S/L | 140 | 10 |
| 149 | MPCA Fencing | 6/30/03 | 1,857 | | 1,857 | 7 MO S/L | 1,857 6,025 | 0 |
| 150 | Phone System Haiti Land | 4/01/03 6/30/03 | 6,025 2,500 | | 6,025 2,500 | 7 MO S/L 0 Land | 0,025 | 0 |
| | Ebenezer building | 6/30/03 | 802 | | 802 | 30 MO S/L | 374 | 27 |
| 154 | Dell Notebook Computer | 6/30/04 | 1,489 | | 1,489 | 5 MO S/L | 1,489 | 0 |
| | Ebenezer Benches EBE-A., 1st floor | 6/30/04 6/30/04 | 1,168 2,875 | | 1,168 | 7 MO S/L 30 MO S/L | 1,168 1,246 | 0 96 |
| | EBE 2 story bldg improvements | 6/30/04 | 234 | | | 30 MO S/L | 102 | 7 |
| 158 | EBE Land purchase | 6/30/04 | 2,991 | | 2,991 | 0 Land | 0 | 0 |
| 159 | EBE-A, 2nd floor | 6/30/04 | 33 | | 1.092 | 30 MO S/L 30 MO S/L | 14 460 | 1 36 |
| | Lanzac Well Lanzac Seawall | 6/30/04 6/30/04 | 1,082 687 | | 687 | 30 MO S/L 30 MO S/L | 469 298 | 36 22 |
| | Lanzac Fencing | 6/30/04 | 4,636 | | 4,636 | 7 MO S/L | 4,636 | 0 |
| | Directway Satellite System | 6/30/04 | 1,895 | | 1,895 | 7 MO S/L | 1,895 | 0 |
| | EBE-A, 1st floor EBE 2 story bldg improvements | 6/30/04 6/30/04 | 100,497 10,395 | | | 30 MO S/L 30 MO S/L | 43,549 4,505 | 3,350 346 |
| | EBE-A, 2nd floor | 6/30/04 | 32,850 | | | 30 MO S/L | 14,235 | 1,095 |
| 167 | EBE-A, 3rd floor | 6/30/04 | 3,604 | | 3,604 | 30 MO S/L | 1,562 | 120 |
| | LaHatte School Bldg #2 - 1st phase | 6/30/05 | 7,000 | | | 30 MO S/L | 2,800 | 233 |
| | Lanzac Well Sou-Borgne/Orphanage Well | 6/30/05 6/30/05 | 843 1,064 | | | 30 MO S/L 30 MO S/L | 337 426 | 28 35 |
| | Lanzac Fencing | 6/30/05 | 533 | | 533 | 7 MO S/L | 533 | 0 |
| 172 | EBE-A, 4th floor | 6/30/05 | 846 | | | 30 MO S/L | 339 | 28 |
| | EBE perimeter wall EBE 2 story bldg improvements | 6/30/05 6/30/05 | 1,691 640 | | | 30 MO S/L 30 MO S/L | 676 256 | 57 21 |
| | EBE-A, 2nd floor | 6/30/05 | 2,908 | | | 30 MO S/L | 1,163 | 97 |
| | • | | • | | • | | • | |

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| | | D.I. | | Duo Coo | Dani- | | | |
|------------|--|---------------------|------------------|------------------------------|-------------------|------------------------|-----------------|--------------|
| Asset | Description | Date In Service | Cost | Bus Sec <u>%</u> 179Bonus | Basis for Depr | PerConv Meth | Prior | Current |
| 176 | EBE-A,, 3rd floor | 6/30/05 | 45,948 | | 45,948 | 30 MO S/L | 18,379 | 1,532 |
| 177 | 20' Steel Container | 6/30/05 | 1,800 | | 1,800 | | 1,800 | 0 500 |
| 178 | Lanzac Multi Purpose Bldg | 6/30/06 6/30/06 | 15,000 18,822 | | 18,822 | 30 MO S/L 30 MO S/L | 5,500 6,901 | 628 |
| 179 180 | LaHatte School Bldg #2 LaHatte - Cistern | 6/30/06 | 6,500 | | | 30 MO S/L | 2,383 | 217 |
| 181 | EBE Perimeter Wall | 6/30/06 | 575 | | 575 | 30 MO S/L | 211 | 19 |
| | EBE 2 story bldg improvements | 6/30/06 | 3,366 | | | 30 MO S/L | 1,234 | 113 |
| 183 | EBE-A., 4th floor | 6/30/06 | 294 | | 2,735 | 30 MO S/L 30 MO S/L | 108 1,003 | 10 91 |
| 184 185 | EBE-A, 2nd & 3rd Floor LaHatte Benches | 6/30/06 6/30/06 | 2,735 950 | | 950 | 7 MO S/L | 950 | 0 |
| | EBE Inverter/Battery Backup System | 6/30/06 | 3,726 | | 3,726 | 7 MO S/L | 3,726 | 0 |
| | EBE-A, 2 story bldg improvements | 6/30/07 | 593 | | 593 | 30 MO S/L | 198 | 20 |
| | EBE-A, 3 story bldg 2nd/3rd floor | 6/30/07 | 20,858 | | 20,858 | 30 MO S/L 30 MO S/L | 6,953 1,453 | 695 145 |
| | EBE-A, 4th/5th floor building | 6/30/07 6/30/07 | 4,358 1,332 | | 1,332 | 7 MO S/L | 1,332 | 0 |
| 190 192 | EBE replaced back gate Wireless Sound System w/headphones | 3/31/07 | 1,591 | | 1,591 | 7 MO S/L | 1,591 | Ō |
| 193 | EBE construction | 6/30/07 | 124,134 | | 124,134 | 30 MO S/L | 41,378 | 4,138 |
| 194 | LaHatte - Cistern | 6/30/07 | 3,892 | | 3,892 | 30 MO S/L | 1,297 | 130 |
| | Lanzac Multi Purpose Bldg | 6/30/07 | 9,959 4,494 | | 9,959 4,494 | 30 MO S/L 7 MO S/L | 3,320 4,494 | 331 0 |
| 196 197 | School Equipment Construction - orphanage | 6/30/07 6/30/07 | 925 | | 925 | 30 MO S/L | 308 | 31 |
| 197 | Library | 5/17/08 | 1,365 | | 1,365 | 39 MO S/L | 318 | 35 |
| 199 | EBE-Å, 4th/5th Floor Building | 11/20/07 | 1,878 | | 1,878 | 39 MO S/L | 461 | 49 |
| 200 | Construction-Orphanage | 7/31/07 | 1,818 | | 1,818 5,259 | 39 MO S/L 39 MO S/L | 462 1,326 | 47 135 |
| 201 202 | Fence Benches | 8/28/07 9/03/07 | 5,259 2,739 | | 2,739 | 7 MO S/L | 2,739 | 0 |
| 202 | Wells | 6/16/08 | 4,671 | | 4,671 | 39 MO S/L | 1,078 | 120 |
| 204 | Vocational School Fence | 5/13/08 | 11,542 | | 11,542 | 39 MO S/L | 2,713 | 296 |
| 205 | EBE-A, 4th/5th Floor Building | 1/17/08 | 5,869 | | | 39 MO S/L | 1,417 | 151 148 |
| 206 | Dewalt Compressor 1.5 HP | 11/18/08 6/30/09 | 1,485 19,383 | | 1,485 19,383 | 10 MO S/L 40 MO S/L | 1,275 3,877 | 484 |
| 207 208 | Improvements to Ebenezer School EBE-A, Electric Work on 4th and 5th Floor | | 1,043 | | | 40 MO S/L | ,222 | 26 |
| | EBE-A, 2nd Floor Library | 6/08/09 | 4,429 | | 4,429 | 40 MO S/L | 895 | 111 |
| 210 | Solar Panels for EBE-A | 12/19/08 | 34,027 | | 34,027 | 40 MO S/L | 7,231 | 850 |
| 211 | EBE-B, Property and Building for Beauty Sc | 12/05/08 | 5,711 12,033 | | 5,711 12,033 | 40 MO S/L 40 MO S/L | 1,225 2,657 | 143 301 |
| 212 213 | Lanzac Office and Bathroom MPCA Director's Office | 8/30/08 1/14/09 | 9,377 | | 9,377 | 40 MO S/L | 1,993 | 234 |
| | Vocational School Project | 1/06/09 | 43,388 | | 43,388 | 40 MO S/L | 9,220 | 1,085 |
| 217 | Two-way Internet Satellite System | 5/11/09 | 1,795 | | 1,795 | 10 MO S/L | 1,466 | 179 |
| 218 | Vocational School Project | 1/06/09 | 19,560 | | 19,560 | 40 MO S/L 10 MO S/L | 4,156 25,130 | 489 3,590 |
| 219 220 | Toyota Hiace Bus 15 Pass, Model LH202L 2009 Mitsubishi Canter L Bed Truck | 6/30/10 12/23/09 | 35,900 37,000 | | 37,000 | 5 MO S/L | 37,000 | 0,5,0 |
| 221 | Cage for Mitsubishi Truck | 2/05/10 | 2,121 | | 2,121 | 5 MO S/L | 2,121 | 0 |
| 222 | Stove for Dupin School | 10/15/09 | 1,073 | | 1,073 | 7 MO S/L | 1,073 | 0 |
| | Power Plant Fan | 9/11/09 | 1,128 | | 1,128 2,343 | 7 MO S/L 7 MO S/L | 1,128 2,343 | 0 |
| 224 225 | EBE New Bldg Battery Backup System Martin Yale 1217A Folding Machine | 6/11/10 11/30/09 | 2,343 1,500 | | 1,500 | 7 MO S/L 7 MO S/L | 1,500 | ŏ |
| 226 | Degance Repairs & Latrine | 9/10/09 | 4,041 | | 4,041 | 7 MO S/L | 4,041 | 0 |
| 227 | 2nd Floor Vocational School | 6/30/10 | 19,660 | | | 40 MO S/L | 3,441 | 491 |
| 228 | EBE-A, 4th/5th Fl Work & Electric Work | 2/02/10 | 2,279 | | 2,279 | 40 MO S/L | 423 | 57 377 |
| | EBE-B, New Bldg Foundation, 1st Fl & Wε EBE-B, New Bldg Wall Gates | 6/25/10 5/29/10 | 15,112 1,411 | | 1,411 | 40 MO S/L 7 MO S/L | 2,645 1,411 | 0 |
| | 6 Hadjin Motorcycles | 12/07/09 | 6,000 | | 6,000 | 5 MO S/L | 6,000 | 0 |
| 232 | Hiait Bible School Building | 6/30/11 | 37,455 | | 37,455 | 40 MO S/L | 5,618 | 937 |
| 233 | Lahatte School Building | 4/30/11 | 11,671 | | 11,671 | 40 MO S/L | 1,799 9,913 | 292 1,652 |
| | EBE-B, Classroom Building | 6/30/11 5/09/11 | 66,085 51,018 | | 51,018 | 40 MO S/L 0 Land | 9,913 | 1,032 |
| | EBE-B, Classroom Bldg Land Inverter Batteries | 5/23/11 | 6,400 | | 6,400 | 5 MO S/L | 6,400 | 0 |
| 237 | Honda Genset Gasoline Generator 6.5 KVA | 2/28/12 | 2,650 | | 2,650 | 5 MO S/L | 2,650 | 0 |
| 238 | New Fan & Water Pump to fix Old Generate | 2/23/12 | 1,439 | | 1,439 | 5 MO S/L | 1,439 | 1 161 |
| | EBE-B, 1st Floor Wiring & 2nd Floor Addi | 6/30/12 12/31/12 | 46,445 34,644 | | | 40 MO S/L 40 MO S/L | 5,806 3,897 | 1,161 867 |
| 240 243 | MPCA 3 Classroom Stand Alone Bldg Copier for Haiti Mission Center | 11/11/13 | 2,455 | | 2,455 | 7 MO S/L | 1,286 | 351 |
| 243 | Roof at Rachel's Inn (Mission Center) | 2/08/14 | 2,325 | | 2,325 | 40 MO S/L | 199 | 58 |
| 245 | Roof at Chardene School | 2/17/14 | 11,185 | | | 40 MO S/L | 932 | 280 |
| 246 | Konica C284e Color Copier | 5/27/14 | 4,867 | | 4,867 99 341 | 7 MO S/L 40 MO S/L | 2,144 1,035 | 695 2,483 |
| | Building - 306 W. Bigelow Ave. LaHatte Pastor's House | 1/31/17 3/30/16 | 99,341 5,417 | | | 40 MO S/L | 169 | 136 |
| | MPCA Well | 6/18/15 | 2,022 | | 2,022 | 15 MO S/L | 270 | 134 |
| 250 | Chardene Land and House | 4/29/15 | 15,300 | | | 40 MO S/L | 829 | 382 |
| 252 | 306 W. Bigelow Renovations | 1/31/17 | 168,958 | | 168,958 | 40 MO S/L | 1,760 | 4,224 |
| l | | | | | | | | |

1227 Mission Possible 34-1290940

FYE: 6/30/2018

Federal Asset Report Form 990, Page 1

| | | Date | | Bus S | Sec | Basis | | | | |
|-------|---|------------|--|-------|-----------|-----------|-----|-----------|---------|----------|
| Asset | Description | In Service | Cost | | 179Bonus_ | | Per | Conv Meth | Prior | Current |
| 253 | Cabinets and Countertops - 306 W. Bigelow | 1/31/17 | 3,934 | | | 3,934 | 15 | MO S/L | 109 | 263 |
| 254 | 2 Furances, coils & condensors - 306 Bigelo | | 12,510 | | | 12,510 | 15 | MO S/L | 348 | 834 |
| 255 | Outside Sign for 306 W. Bigelow | 1/31/17 | 1,505 | | | 1,505 | 7 | MO S/L | 90 | 215 |
| 256 | Chardene Playground and Fence | 6/30/16 | 8,557 | | | 8,557 | 7 | MO S/L | 1,222 | 1,223 |
| 257 | Lanzac playground and fence | 6/30/16 | 8,557 | | | 8,557 | 7 | MO S/L | 1,222 | 1,223 |
| 258 | Degance Land Purchase | 4/04/16 | 45,000 | | | 45,000 | 0 | | 0 | 0 |
| 259 | Wall for New Property at Degance | 7/31/16 | 47,976 | | | 47,976 | 15 | MO S/L | 2,932 | 3,198 |
| 260 | Land - 306 W. Bigelow | 1/31/17 | 11,038 | | | 11,038 | 0 | Land | 0 | 0 |
| 261 | Water Pump for Well at St. Mark's | 5/30/16 | 1,550 | | | 1,550 | | MO S/L | 112 | 103 |
| 262 | Excavating, Install & Paving of Parking Lot | | 28,685 | | | 28,685 | | MO S/L | 797 | 1,912 |
| 263 | Carpet for USA Building | 1/31/17 | 12,868 | | | 12,868 | | MO S/L | 536 | 1,287 |
| 264 | Sharp 70" TV S/N B511819145 w/mounting | | 1,695 | | | 1,695 | | MO S/L | 141 | 339 |
| 266 | MPĆA Playground | 2/28/17 | 4,493 | | | 4,493 | | MO S/L | 214 | 642 |
| 267 | Well at Degeance | 6/30/17 | 1,172 | | | 1,172 | | MO S/L | 0 | 78 |
| 268 | Well at Chardene and Hand Pump | 3/31/17 | 2,188 | | | 2,188 | | MO S/L | 36 | 146 |
| 269 | Solar Panels at MPCA | 2/28/17 | 20,247 | | | 20,247 | 5 | MO S/L | 1,350 | 4,049 |
| 271 | Degeance Land Terrace (continued cost) | 2/01/18 | 22,661 | | | 22,661 | 0 | Memo | 0 | 0 |
| 272 | | 10/27/17 | 12,609 | | | 12,609 | 0 | Land | 0 | 0 |
| 273 | MPCA Roof | 2/20/18 | 1,241 | | | 1,241 | 40 | MO S/L | 0 | 10 |
| 274 | Mission Center Batteries | 2/20/18 | 4,829 | | | 4,829 | 7 | MO S/L | 0 | 230 |
| 275 | Mission Center Tool Storage Shelves | 2/20/18 | 1,056 | | | 1,056 | | MO S/L | 0 | 70 53 |
| 277 | Dupin Office & Classroom | 3/01/18 | 6,226 | | _ | 6,226 | 40 | MO S/L | | 52 |
| | Total Other Depreciation | | 2,387,784 | | _ | 2,387,784 | | | 855,455 | 63,568 |
| | | | * ************************************ | | | 2 202 204 | | | 055 455 | 42 569 |
| | Total ACRS and Other Depreci | ation | 2,387,784 | | = | 2,387,784 | | | 855,455 | 63,568 |
| | | | 2 207 704 | | | 2,387,784 | | | 855,455 | 63,568 |
| | Grand Totals | •• | 2,387,784 | | | 2,387,784 | | | 055,455 | 05,500 |
| | Less: Dispositions and Transfer Less: Start-up/Org Expense | S | 0 | | | 0 | | | ő | ŏ |
| | , , , | - | 0.207.704 | | - | 2 207 704 | | | 855,455 | 63,568 |
| | Net Grand Totals | = | 2,387,784 | | == | 2,387,784 | | | 033,433 | 05,500 |



Department of the Treasury Internal Revenue Service Ogden UT 84201
 Notice
 CP211A

 Tax period
 June 30, 2018

 Notice date
 December 3, 2018

 Employer ID number
 34-1290940

 To contact us
 Phone 1-877-829-5500

 FAX 801-620-5555

Page 1 of 1

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MISSION POSSIBLE 306 W BIGELOW AVE FINDLAY OH 45840-4057



213945

Important information about your June 30, 2018 Form 990

We approved your Form 8868, Application for Extension of Time To File an Exempt Organization Return

We approved the Form 8868 for your June 30, 2018 Form 990. Your new due date is May 15, 2019.

What you need to do

File your June 30, 2018 Form 990 by May 15, 2019. We encourage you to use electronic filing—the fastest and easiest way to file.

Visit www.irs.gov/charities to learn about approved e-File providers, what types of returns can be filed electronically, and whether you are required to file electronically.

Additional information

- Visit www.irs.gov/cp211a
- For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).
- Keep this notice for your records.

If you need assistance, please don't hesitate to contact us.