

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

OMB No. 1545-0047

2018
Open to Public Inspection

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

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

B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization <p style="text-align: center;">Mission Possible</p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p>306 W. Bigelow</p> City or town, state or province, country, and ZIP or foreign postal code <p>Findlay OH 45840</p>	D Employer identification number <p style="text-align: center;">34-1290940</p>
	E Telephone number <p style="text-align: center;">419-422-3364</p>	
	F Name and address of principal officer: <p style="text-align: center;">David Rath</p>	
	G Gross receipts \$ 1,186,474	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ www.OurMissionIsPossible.org		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1979
		M State of legal domicile: OH

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

H(c) Group exemption number ▶

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <p style="text-align: center;">See Schedule O</p>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	11
	6 Total number of volunteers (estimate if necessary)	6	170
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b Net unrelated business taxable income from Form 990-T, line 38	7b	0
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	1,086,515	911,461
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,800	6,584
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	147,125	265,219
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,239,440	1,183,264
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
14 Benefits paid to or for members (Part IX, column (A), line 4)			0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		369,960	342,351
16a Professional fundraising fees (Part IX, column (A), line 11e)			0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 70,217			
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		953,880	876,119
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,323,840	1,218,470	
19 Revenue less expenses. Subtract line 18 from line 12	-84,400	-35,206	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	1,620,102	1,606,659
	22 Net assets or fund balances. Subtract line 21 from line 20	167,087	165,027
		1,453,015	1,441,632

Part II Signature Block

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

Sign Here	Signature of officer <p style="text-align: center;">David Rath</p>		Date <p style="text-align: center;">President</p>
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name <p>Robin L. Ridge, CPA</p>	Preparer's signature <p>Robin L. Ridge, CPA</p>	Date <p>01/27/20</p>
	Check if self-employed <input type="checkbox"/>		PTIN <p>P00025172</p>
	Firm's name ▶ Ridge & Company CPA, Inc.		Firm's EIN ▶ 34-1935986
	Firm's address ▶ 314 W Hardin St Findlay, OH 45840		Phone no. 419-424-1835

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

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

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

X

1 Briefly describe the organization's mission:

See Schedule O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes **X** No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes **X** No

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

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

4a (Code:) (Expenses \$ **1,036,635** including grants of \$) (Revenue \$)

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 for construction, medical missions, pastor and teacher training and evangelism.

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

N/A

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

N/A

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

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

4e Total program service expenses **▶ 1,036,635**

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

X

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

1a	1
1b	0

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

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	1a 12		
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b 12		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	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		X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," 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?		
16b			

Section C. Disclosure

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

**Trace Roth
Findlay**

306 W. Bigelow

OH 45840

419-422-3364

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Pastor Herb Codington	12.00									
Board Member	0.00	X					22,000	0	0	
(2) Mark Yoder	2.00									
Chairman of Board	0.00	X		X			0	0	0	
(3) Jim Gillam	1.00									
Board Member	0.00	X					0	0	0	
(4) Jenn Buzaleski	1.00									
Board Member	0.00	X					0	0	0	
(5) Josh Steiner	1.00									
Board Member	0.00	X					0	0	0	
(6) John W Schwartz Jr.	2.00									
Vice Chairman	0.00	X		X			0	0	0	
(7) Amanda Cronkleton	2.00									
Secretary	0.00	X		X			0	0	0	
(8) Bruce Feeney	2.00									
Treasurer	0.00	X		X			0	0	0	
(9) Patti Spiegel	1.00									
Board Member	0.00	X					0	0	0	
(10) Guthrie Bunn	1.00									
Board Member	0.00	X					0	0	0	
(11) Mark Macke	1.00									
Board Member	0.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) Jeff Eiden	1.00									
Board Member	0.00	X					0	0	0	
(13) David Rath	40.00									
President	0.00			X			70,000	0	0	
(14) Trace Roth	40.00									
Director of Finance	0.00			X			46,800	0	0	
1b Sub-total							138,800			
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							138,800			

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

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

Section B. Independent Contractors

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

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

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

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	911,461				
	g Noncash contributions included in lines 1a-1f:	\$	2,734				
	h Total. Add lines 1a-1f		911,461				
Program Service Revenue	2a	Busn. Code					
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		6,194			6,194	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
	b Less: rental exps.						
	c Rental inc. or (loss)						
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other	3,600			
	b Less: cost or other basis & sales exps.			3,210			
	c Gain or (loss)			390			
	d Net gain or (loss)			390	390		
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue		Busn. Code					
11a			265,219			265,219	
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			265,219				
12 Total revenue. See instructions.			1,183,264	390	0	271,413	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	138,800	74,089	34,511	30,200
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	179,059	137,755	22,028	19,276
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	24,492	13,075	6,089	5,328
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	13,025		13,025	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion				
13 Office expenses	29,391	2,900	16,253	10,238
14 Information technology				
15 Royalties				
16 Occupancy	3,334	476	1,429	1,429
17 Travel	3,351		2,412	939
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	55,196	42,944	12,252	
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Joint Ministry Support	764,574	764,574		
b In-Kind Expense	2,734		2,734	
c Banquet and Event	1,985			1,985
d Telephone	1,918	822	274	822
e All other expenses	611		611	
25 Total functional expenses. Add lines 1 through 24e	1,218,470	1,036,635	111,618	70,217
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	50	1	50
	2 Savings and temporary cash investments	82,302	2	61,769
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	2,882	4	38,107
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,425,440		
	b Less: accumulated depreciation	10b 983,194	1,468,762	10c 1,442,246
	11 Investments—publicly traded securities	106,745	11	109,602
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	-40,639	15	-45,115
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,620,102	16	1,606,659	
Liabilities	17 Accounts payable and accrued expenses	16,242	17	9,159
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	150,845	25	155,868
	26 Total liabilities. Add lines 17 through 25	167,087	26	165,027
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,272,737	27	1,235,374
	28 Temporarily restricted net assets	104,628	28	130,608
	29 Permanently restricted net assets	75,650	29	75,650
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	1,453,015	33	1,441,632	
34 Total liabilities and net assets/fund balances	1,620,102	34	1,606,659	

Part XI Reconciliation of Net Assets

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

X

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,183,264
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,218,470
3	Revenue less expenses. Subtract line 2 from line 1	3	-35,206
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,453,015
5	Net unrealized gains (losses) on investments	5	-85
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	23,908
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,441,632

Part XII Financial Statements and Reporting

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

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

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization

Mission Possible

Employer identification number

34-1290940

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,070,701	999,686	819,893	1,086,515	911,461	4,888,256
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1,070,701	999,686	819,893	1,086,515	911,461	4,888,256
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						4,888,256

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	1,070,701	999,686	819,893	1,086,515	911,461	4,888,256
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	4,187	4,919	4,390	4,309	6,194	23,999
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	115,923	117,714	121,964	147,125	265,219	767,945
11 Total support. Add lines 7 through 10						5,680,200
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	86.06%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	87.88%
16a 33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

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

19a 33 1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? 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.)		

Part IV Supporting Organizations *(continued)*

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? 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.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? 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.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? 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).		

Section D. All Type III Supporting Organizations

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

Section 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 instructions).
 - 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.
 - c The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

	Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? 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.		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? 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.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .		
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.		

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

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

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

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

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

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

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported 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 organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part II, Line 10 - Other Income Detail

Misc. Income/ Reimbursements Canada \$ 767,945

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

2018

Open to Public Inspection

Name of the organization

Employer identification number

Mission Possible

34-1290940

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

Part II Conservation Easements.

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use (e.g., recreation or education), Protection of natural habitat, Preservation of open space, Preservation of a historically important land area, Preservation of a certified historic structure, 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements, b Total acreage restricted by conservation easements, c Number of conservation easements on a certified historic structure included in (a), d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

Table with 2 columns: \$, \$, \$, \$. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items., b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X, 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

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

	Amount
1c	
1d	
1e	
1f	

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

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	75,650	75,650	75,650	75,650	75,650
b Contributions					
c Net investment earnings, gains, and losses	6,292	4,204	4,206	4,560	3,445
d Grants or scholarships					
e Other expenditures for facilities and programs	6,292	4,204	4,206	4,560	3,445
f Administrative expenses					
g End of year balance	98,147	75,650	75,650	75,650	75,650

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment %
- b Permanent endowment 100.00 %
- c Temporarily restricted endowment %

The percentages on lines 2a, 2b, and 2c should equal 100%.

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

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

	Yes	No
3a(i)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3a(ii)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3b	<input type="checkbox"/>	<input type="checkbox"/>

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		306,007		306,007
b Buildings		1,702,335	671,082	1,031,253
c Leasehold improvements				
d Equipment		329,237	293,484	35,753
e Other		87,861	18,628	69,233

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶ 1,442,246

Part VII Investments—Other Securities.

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

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

Part VIII Investments—Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (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 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) Canadian Interest in J. M. Assets	155,868
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	155,868

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	1,183,429
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-85	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	250	
e	Add lines 2a through 2d	2e		165
3	Subtract line 2e from line 1	3		1,183,264
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		1,183,264

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	1,218,470
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3		1,218,470
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		1,218,470

Part XIII Supplemental Information.

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

Part XI, Line 2d - Revenue Amounts Included in Financials - Other

Change in Community Foundation \$ 250

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization

Mission Possible

Employer identification number

34-1290940

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
Central America and the Carribbean					
(1)	8	257	Program Services	Feeding/Schooling	1,036,635
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal	8	257			1,036,635
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	8	257			1,036,635

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

3 Enter total number of other organizations or entities

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* **Yes** **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**

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

Region	Expenditures	Investments
Central America and the Carribbean	\$ 1,036,635	\$ 0

Part V - Additional Information

Prepared in accordance with U.S. GAAP.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Employer identification number

Mission Possible

34-1290940

Form 990 - Organization's Mission

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, pastor and teacher training and evangelism.

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

Name of the organization

Employer identification number

Mission Possible

34-1290940

disobedience of conflict policy compliance.

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 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

Change in community Foundation	\$	250
Transfer of capital assets per Joint Ministry	\$	23,658
Total	\$	23,908

Form **4562**

Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

2018

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

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

Attachment Sequence No. **179**

Name(s) shown on return

Identifying number
34-1290940

Mission Possible

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

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

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

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

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

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	64,175

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

Section A

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

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

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

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

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

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	64,175
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2018)

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

Name

Taxpayer Identification Number

Mission Possible**34-1290940**

		2017	2018	Differences
Revenue	1. Contributions, gifts, grants	1,086,515	911,461	-175,054
	2. Membership dues and assessments			
	3. Government contributions and grants			
	4. Program service revenue			
	5. Investment income	4,309	6,194	1,885
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory	1,491	390	-1,101
	8. Net income or (loss) from fundraising events			
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory			
	11. Other revenue	147,125	265,219	118,094
	12. Total revenue. Add lines 1 through 11	1,239,440	1,183,264	-56,176
Expenses	13. Grants and similar amounts paid			
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.	138,801	138,800	-1
	16. Salaries, other compensation, and employee benefits	231,159	203,551	-27,608
	17. Professional fundraising fees			
	18. Other professional fees	12,680	13,025	345
	19. Occupancy, rent, utilities, and maintenance	8,084	3,334	-4,750
	20. Depreciation and Depletion	54,631	55,196	565
	21. Other expenses	878,485	804,564	-73,921
	22. Total expenses. Add lines 13 through 21	1,323,840	1,218,470	-105,370
	23. Excess or (Deficit). Subtract line 22 from line 12	-84,400	-35,206	49,194
Other Information	24. Total exempt revenue	1,239,440	1,183,264	-56,176
	25. Total unrelated revenue			
	26. Total excludable revenue	152,925	271,803	118,878
	27. Total assets	1,620,102	1,606,659	-13,443
	28. Total liabilities	167,087	165,027	-2,060
	29. Retained earnings	1,453,015	1,441,632	-11,383
	30. Number of voting members of governing body	12	12	
31. Number of independent voting members of governing body	12	12		
32. Number of employees	11	11		
33. Number of volunteers	170	170		

Form **990**

Tax Return History

2018

Name

Mission Possible

Employer Identification Number
34-1290940

	2014	2015	2016	2017	2018	2019
Contributions, gifts, grants	1,070,701	999,686	819,893	1,086,515	911,461	
Membership dues						
Program service revenue						
Capital gain or loss	105	8,605	-248	1,491	390	
Investment income	4,187	4,919	4,390	4,309	6,194	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue	115,923	117,714	121,964	147,125	265,219	
Total revenue	1,190,916	1,130,924	945,999	1,239,440	1,183,264	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.	155,716	160,856	121,243	138,801	138,800	
Other compensation	104,413	165,845	190,031	231,159	203,551	
Professional fees	12,600	12,206	12,328	12,680	13,025	
Occupancy costs	3,746	6,170	10,295	8,084	3,334	
Depreciation and depletion	44,483	38,881	45,691	54,631	55,196	
Other expenses	777,183	906,802	734,541	878,485	804,564	
Total expenses	1,098,141	1,290,760	1,114,129	1,323,840	1,218,470	
Excess or (Deficit)	92,775	-159,836	-168,130	-84,400	-35,206	
Total exempt revenue	1,190,916	1,130,924	945,999	1,239,440	1,183,264	
Total unrelated revenue						
Total excludable revenue	120,215	131,238	126,106	152,925	271,803	
Total Assets	1,882,960	1,814,974	1,658,926	1,620,102	1,606,659	
Total Liabilities	189,849	177,242	153,156	167,087	165,027	
Net Fund Balances	1,693,111	1,637,732	1,505,770	1,453,015	1,441,632	

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
Other 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	Generator	4/30/95	301		301	5 MO S/L	301	0
19	Generator #1 Dayspring	3/27/96	550		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	Sewing Machines MPCA	6/10/99	847		847	5 MO S/L	847	0
24	Ebenezer Desks	1/13/99	916		916	5 MO S/L	916	0
29	Degeance Propane Burners	12/31/00	745		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	Lanzac MC Generator shipping costs	4/23/01	1,041		1,041	5 MO S/L	1,041	0
33	AC unit 1st floor	6/29/01	538		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	Lanzac MC Generator	4/23/01	5,901		5,901	5 MO S/L	5,901	0
37	MPCA Wall/Gate	1/30/98	8,741		8,741	30 MO S/L	5,949	291
38	Dupin Bldg	2/17/98	16,600		16,600	30 MO S/L	11,251	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	440	23
41	Lanzac Workshop	8/30/98	6,372		6,372	30 MO S/L	4,212	213
42	Chardene Buildings	6/01/99	38,332		38,332	30 MO S/L	24,384	1,278
43	Ebenezer Filter Well	7/14/98	1,116		1,116	30 MO S/L	744	37
44	Ebenezer Bathroom	7/31/98	766		766	30 MO S/L	509	25
45	Ebenezer Construction	9/30/98	8,050		8,050	30 MO S/L	5,300	268
46	Lanzac River Wall	2/17/00	3,596		3,596	30 MO S/L	2,198	119
47	Lanzac School Grounds	9/30/99	1,365		1,365	30 MO S/L	853	46
48	MPCA MP Boutique	3/31/00	3,564		3,564	30 MO S/L	2,168	119
49	Chardene Wall/Fencing	1/31/00	3,071		3,071	30 MO S/L	1,885	103
50	Chardene School Grounds	5/31/00	2,201		2,201	30 MO S/L	1,327	73
52	Chardene Bldg #1 Lower Bldg	9/30/99	1,700		1,700	30 MO S/L	1,063	56
53	Lanzac MC Bldg #3	9/30/99	2,314		2,314	30 MO S/L	1,446	77
54	Ebenezer 2nd Bldg 2nd Story	11/30/99	5,110		5,110	30 MO S/L	3,165	171
55	Chardene Buildings	12/31/00	3,233		3,233	30 MO S/L	1,886	108
56	Chardene Basketball Court	9/30/00	489		489	30 MO S/L	290	16
57	Lanzac Seawall	11/30/00	2,408		2,408	30 MO S/L	1,411	81
58	Lanzac Security Lighting/Walls	4/30/01	3,156		3,156	7 MO S/L	3,156	0
59	First Floor Restroom - 2nd bldg.	6/30/01	1,113		1,113	7 MO S/L	1,113	0
60	2nd Floor - 2nd bldg. EBE	6/30/01	36,998		36,998	30 MO S/L	20,965	1,234
62	Basketball court 2nd half	6/30/01	2,587		2,587	30 MO S/L	1,466	86
63	Romans 12 Construction	1/01/97	2,013		2,013	30 MO S/L	1,476	67
64	Lanzac Sidewalk	1/01/97	73		73	30 MO S/L	52	3
65	Dental Clinic Improvement	1/01/97	138		138	30 MO S/L	102	5
66	Lanzac Riverwall	1/01/97	1,105		1,105	30 MO S/L	811	36
67	Lanzac School	1/01/97	1,199		1,199	30 MO S/L	879	40
68	Lanzac Workshop	1/01/97	490		490	30 MO S/L	359	16
69	Rachels Inn	1/01/97	4,578		4,578	30 MO S/L	3,398	153
70	Lanzac SC.Fence	1/01/97	990		990	30 MO S/L	726	33
71	Shower House	1/01/97	2,889		2,889	30 MO S/L	2,118	96
72	Laundry	1/01/97	334		334	30 MO S/L	245	11
73	Dupin Construction	1/01/97	13,249		13,249	30 MO S/L	9,717	441
74	Building - 3rd House	1/01/96	1,636		1,636	30 MO S/L	1,253	54
75	MC Gate and Arch	1/01/96	905		905	30 MO S/L	693	31
76	Lanzac School	1/01/96	13,425		13,425	30 MO S/L	10,300	447
77	Ebenezer Building #2	6/30/97	5,144		5,144	30 MO S/L	3,601	171
78	Ebenezer Grounds	6/30/97	645		645	30 MO S/L	452	21
79	Lanzac Construction	6/30/94	2,748		2,748	30 MO S/L	2,198	92
80	Lanzac Electricity	6/30/93	1,000		1,000	30 MO S/L	820	33
81	Lanzac Building Improvements	6/30/93	9,011		9,011	30 MO S/L	7,509	301
82	MPCA Construction	6/30/94	2,712		2,712	30 MO S/L	2,170	90
83	Lanzac Kitchen	5/01/95	1,769		1,769	30 MO S/L	1,366	59
84	Mission Center Gate	3/31/95	157		157	30 MO S/L	157	0
85	Dupin Roof/Floors/Desk	2/01/95	3,449		3,449	30 MO S/L	2,692	115
86	Chardene Improvements	5/01/95	564		564	30 MO S/L	436	18
87	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
90	Building Degeance	7/01/90	2,362		2,362	30 MO S/L	2,362	0
91	Building MTC	7/01/90	83,093		83,093	30 MO S/L	83,093	0

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec		Basis for Depr	PerConv Meth	Prior	Current
				%	179Bonus				
92	Capital Improvements	7/01/90	19,031			19,031	30 MO S/L	19,031	0
93	DR - Building Ebenezer	7/01/90	2,040			2,040	30 MO S/L	2,040	0
94	DR - Building Ebenezer 2	6/23/98	8,993			8,993	30 MO S/L	5,996	299
95	Lanzac Mission Center	4/30/98	12,272			12,272	30 MO S/L	8,249	409
96	Wells Cargo Trailer	11/23/94	1,500			1,500	5 MO S/L	1,500	0
100	Nissan UR Van/Bus 1990	7/01/90	22,500			22,500	5 MO S/L	22,500	0
101	GMC Truck 1986	7/01/90	15,837			15,837	5 MO S/L	15,837	0
102	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	5 MO S/L	22,100	0
104	Lanzac 3rd House Bunk Bed	4/30/94	215			215	5 MO S/L	215	0
105	Dorm Mattresses Lanzac	5/31/93	163			163	5 MO S/L	163	0
106	Desks Haiti	6/09/93	722			722	5 MO S/L	722	0
107	School Desk Construction	6/30/94	267			267	5 MO S/L	267	0
108	School Desk Lumber	6/30/94	1,807			1,807	5 MO S/L	1,807	0
109	School Desk Steel	6/30/94	361			361	5 MO S/L	361	0
110	Lanzac Mattresses	4/17/95	1,224			1,224	5 MO S/L	1,224	0
111	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	7/01/90	355			355	5 MO S/L	355	0
114	Haiti Mattress	6/01/96	302			302	5 MO S/L	302	0
115	Furniture & Fixtures	6/30/90	15,994			15,994	5 MO S/L	15,994	0
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	Land MTC	6/15/83	36,000			36,000	0 -- Land	0	0
119	Lanzac River Walk Embankment	6/30/95	3,970			3,970	30 MO S/L	3,044	132
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	0
123	Land Lanzac	6/30/91	4,359			4,359	0 -- Land	0	0
124	Land River	6/30/91	400			400	0 -- Land	0	0
128	Lanzac MC Land	5/31/00	12,584			12,584	0 -- Land	0	0
133	Ebenezer Basketball Court	6/30/02	2,185			2,185	30 MO S/L	1,165	73
134	Ebenezer Perimeter Wall	6/30/02	3,890			3,890	30 MO S/L	2,075	130
135	2nd Building Improvements	6/30/02	2,276			2,276	30 MO S/L	1,214	76
136	Lanzac Mission Center Office/Residence	6/30/02	18,693			18,693	30 MO S/L	9,969	624
137	Lanzac Seawall	6/30/02	672			672	30 MO S/L	358	23
138	LaHatte School Building	6/30/02	20,275			20,275	30 MO S/L	10,813	676
139	Vehicle Accessories	6/30/02	1,494			1,494	7 MO S/L	1,494	0
142	Ebenezer Perimeter Wall	6/30/03	1,045			1,045	30 MO S/L	522	35
143	2nd Bldg Improvements	6/30/03	1,077			1,077	30 MO S/L	539	35
144	Toilet - Orphanage/Boutique	6/30/03	1,370			1,370	30 MO S/L	685	46
145	Lanzac Mission Center Imp	6/30/03	2,889			2,889	30 MO S/L	1,445	96
146	Lanzac Seawall	6/30/03	1,999			1,999	30 MO S/L	999	67
147	LaHatte School Building	12/31/02	11,988			11,988	30 MO S/L	6,194	399
148	Dupin Land Survey/Legal Costs	6/30/03	299			299	30 MO S/L	150	10
149	MPCA Fencing	6/30/03	1,857			1,857	7 MO S/L	1,857	0
150	Phone System	4/01/03	6,025			6,025	7 MO S/L	6,025	0
152	Haiti Land	6/30/03	2,500			2,500	0 -- Land	0	0
153	Ebenezer building	6/30/03	802			802	30 MO S/L	401	27
154	Dell Notebook Computer	6/30/04	1,489			1,489	5 MO S/L	1,489	0
155	Ebenezer Benches	6/30/04	1,168			1,168	7 MO S/L	1,168	0
156	EBE-A, 1st floor	6/30/04	2,875			2,875	30 MO S/L	1,342	95
157	EBE 2 story bldg - improvements	6/30/04	234			234	30 MO S/L	109	8
158	EBE Land purchase	6/30/04	2,991			2,991	0 -- Land	0	0
159	EBE-A, 2nd floor	6/30/04	33			33	30 MO S/L	15	2
160	Lanzac Well	6/30/04	1,082			1,082	30 MO S/L	505	36
161	Lanzac Seawall	6/30/04	687			687	30 MO S/L	320	23
162	Lanzac Fencing	6/30/04	4,636			4,636	7 MO S/L	4,636	0
163	Directway Satellite System	6/30/04	1,895			1,895	7 MO S/L	1,895	0
164	EBE-A, 1st floor	6/30/04	100,497			100,497	30 MO S/L	46,899	3,350
165	EBE 2 story bldg improvements	6/30/04	10,395			10,395	30 MO S/L	4,851	347
166	EBE-A, 2nd floor	6/30/04	32,850			32,850	30 MO S/L	15,330	1,095
167	EBE-A, 3rd floor	6/30/04	3,604			3,604	30 MO S/L	1,682	120
168	LaHatte School Bldg #2 - 1st phase	6/30/05	7,000			7,000	30 MO S/L	3,033	234
169	Lanzac Well	6/30/05	843			843	30 MO S/L	365	29
170	Sou-Borgne/Orphanage Well	6/30/05	1,064			1,064	30 MO S/L	461	36
171	Lanzac Fencing	6/30/05	533			533	7 MO S/L	533	0
172	EBE-A, 4th floor	6/30/05	846			846	30 MO S/L	367	28
173	EBE perimeter wall	6/30/05	1,691			1,691	30 MO S/L	733	56
174	EBE 2 story bldg improvements	6/30/05	640			640	30 MO S/L	277	22
175	EBE-A, 2nd floor	6/30/05	2,908			2,908	30 MO S/L	1,260	97

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
176	EBE-A,, 3rd floor	6/30/05	45,948		45,948	30 MO S/L	19,911	1,531
177	20' Steel Container	6/30/05	1,800		1,800	7 MO S/L	1,800	0
178	Lanzac Multi Purpose Bldg	6/30/06	15,000		15,000	30 MO S/L	6,000	500
179	LaHatte School Bldg #2	6/30/06	18,822		18,822	30 MO S/L	7,529	627
180	LaHatte - Cistern	6/30/06	6,500		6,500	30 MO S/L	2,600	217
181	EBE Perimeter Wall	6/30/06	575		575	30 MO S/L	230	19
182	EBE 2 story bldg improvements	6/30/06	3,366		3,366	30 MO S/L	1,347	112
183	EBE-A,, 4th floor	6/30/06	294		294	30 MO S/L	118	10
184	EBE-A, 2nd & 3rd Floor	6/30/06	2,735		2,735	30 MO S/L	1,094	91
185	LaHatte Benches	6/30/06	950		950	7 MO S/L	950	0
186	EBE Inverter/Battery Backup System	6/30/06	3,726		3,726	7 MO S/L	3,726	0
187	EBE-A, 2 story bldg improvements	6/30/07	593		593	30 MO S/L	218	19
188	EBE-A, 3 story bldg 2nd/3rd floor	6/30/07	20,858		20,858	30 MO S/L	7,648	695
189	EBE-A, 4th/5th floor building	6/30/07	4,358		4,358	30 MO S/L	1,598	145
190	EBE replaced back gate	6/30/07	1,332		1,332	7 MO S/L	1,332	0
192	Wireless Sound System w/headphones	3/31/07	1,591		1,591	7 MO S/L	1,591	0
193	EBE construction	6/30/07	124,134		124,134	30 MO S/L	45,516	4,138
194	LaHatte - Cistern	6/30/07	3,892		3,892	30 MO S/L	1,427	130
195	Lanzac Multi Purpose Bldg	6/30/07	9,959		9,959	30 MO S/L	3,651	332
196	School Equipment	6/30/07	4,494		4,494	7 MO S/L	4,494	0
197	Construction - orphanage	6/30/07	925		925	30 MO S/L	339	31
198	Library	5/17/08	1,365		1,365	39 MO S/L	353	35
199	EBE-A, 4th/5th Floor Building	11/20/07	1,878		1,878	39 MO S/L	510	48
200	Construction-Orphanage	7/31/07	1,818		1,818	39 MO S/L	509	47
201	Fence	8/28/07	5,259		5,259	39 MO S/L	1,461	135
202	Benches	9/03/07	2,739		2,739	7 MO S/L	2,739	0
203	Wells	6/16/08	4,671		4,671	39 MO S/L	1,198	119
204	Vocational School Fence	5/13/08	11,542		11,542	39 MO S/L	3,009	296
205	EBE-A, 4th/5th Floor Building	1/17/08	5,869		5,869	39 MO S/L	1,568	150
206	Dewalt Compressor 1.5 HP	11/18/08	1,485		1,485	10 MO S/L	1,423	62
207	Improvements to Ebenezer School	6/30/09	19,383		19,383	40 MO S/L	4,361	485
208	EBE-A, Electric Work on 4th and 5th Floor	1/06/09	1,043		1,043	40 MO S/L	248	26
209	EBE-A, 2nd Floor Library	6/08/09	4,429		4,429	40 MO S/L	1,006	110
210	Solar Panels for EBE-A	12/19/08	34,027		34,027	40 MO S/L	8,081	851
211	EBE-B,Property and Building for Beauty S	12/05/08	5,711		5,711	40 MO S/L	1,368	143
212	Lanzac Office and Bathroom	8/30/08	12,033		12,033	40 MO S/L	2,958	301
213	MPCA Director's Office	1/14/09	9,377		9,377	40 MO S/L	2,227	234
215	Vocational School Project	1/06/09	43,388		43,388	40 MO S/L	10,305	1,084
217	Two-way Internet Satellite System	5/11/09	1,795		1,795	10 MO S/L	1,645	150
218	Vocational School Project	1/06/09	19,560		19,560	40 MO S/L	4,645	489
219	Toyota Hiace Bus 15 Pass, Model LH202L	6/30/10	35,900		35,900	10 MO S/L	28,720	3,590
220	2009 Mitsubishi Canter L Bed Truck	12/23/09	37,000		37,000	5 MO S/L	37,000	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
223	Power Plant Fan	9/11/09	1,128		1,128	7 MO S/L	1,128	0
224	EBE New Bldg Battery Backup System	6/11/10	2,343		2,343	7 MO S/L	2,343	0
225	Martin Yale 1217A Folding Machine	11/30/09	1,500		1,500	7 MO S/L	1,500	0
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		19,660	40 MO S/L	3,932	492
228	EBE-A, 4th/5th Fl Work & Electric Work	2/02/10	2,279		2,279	40 MO S/L	480	57
229	EBE-B, New Bldg Foundation, 1st Fl & Wc	6/25/10	15,112		15,112	40 MO S/L	3,022	378
230	EBE-B, New Bldg Wall Gates	5/29/10	1,411		1,411	7 MO S/L	1,411	0
231	6 Hadjin Motorcycles	12/07/09	6,000		6,000	5 MO S/L	6,000	0
232	Hait Bible School Building	6/30/11	37,455		37,455	40 MO S/L	6,555	936
233	Lahatte School Building	4/30/11	11,671		11,671	40 MO S/L	2,091	292
234	EBE-B, Classroom Building	6/30/11	66,085		66,085	40 MO S/L	11,565	1,652
235	EBE-B, Classroom Bldg Land	5/09/11	51,018		51,018	0 -- Land	0	0
236	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 Generat	2/23/12	1,439		1,439	5 MO S/L	1,439	0
239	EBE-B, 1st Floor Wiring & 2nd Floor Addi	6/30/12	46,445		46,445	40 MO S/L	6,967	1,161
240	MPCA 3 Classroom Stand Alone Bldg	12/31/12	34,644		34,644	40 MO S/L	4,764	866
243	Copier for Haiti Mission Center	11/11/13	2,455		2,455	7 MO S/L	1,637	350
244	Roof at Rachel's Inn (Mission Center)	2/08/14	2,325		2,325	40 MO S/L	257	58
245	Roof at Chardene School	2/17/14	11,185		11,185	40 MO S/L	1,212	279
246	Konica C284e Color Copier	5/27/14	4,867		4,867	7 MO S/L	2,839	695
247	Building - 306 W. Bigelow Ave.	1/31/17	99,341		99,341	40 MO S/L	3,518	2,484
248	LaHatte Pastor's House	3/30/16	5,417		5,417	40 MO S/L	305	135
249	MPCA Well	6/18/15	2,022		2,022	15 MO S/L	404	135
250	Chardene Land and House	4/29/15	15,300		15,300	40 MO S/L	1,211	383
252	306 W. Bigelow Renovations	1/31/17	168,958		168,958	40 MO S/L	5,984	4,224

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
253	Cabinets and Countertops - 306 W. Bigelow	1/31/17	3,934			3,934	15 MO S/L	372	262
254	2 Furances, coils & condensers - 306 Bigelk	1/31/17	12,510			12,510	15 MO S/L	1,182	834
255	Outside Sign for 306 W. Bigelow	1/31/17	1,505			1,505	7 MO S/L	305	215
256	Chardene Playground and Fence	6/30/16	8,557			8,557	7 MO S/L	2,445	1,222
257	Lanzac playground and fence	6/30/16	8,557			8,557	7 MO S/L	2,445	1,222
258	Degance Land Purchase	4/04/16	45,000			45,000	0 -- Land	0	0
259	Wall for New Property at Degance	7/31/16	47,976			47,976	15 MO S/L	6,130	3,199
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	15 MO S/L	215	104
262	Excavating, Install & Paving of Parking Lot	1/31/17	28,685			28,685	15 MO S/L	2,709	1,912
263	Carpet for USA Building	1/31/17	12,868			12,868	10 MO S/L	1,823	1,287
264	Sharp 70" TV S/N B511819145 w/mountin;	1/31/17	1,695			1,695	5 MO S/L	480	339
266	MPCA Playground	2/28/17	4,493			4,493	7 MO S/L	856	642
267	Well at Degeance	6/30/17	1,172			1,172	15 MO S/L	78	78
268	Well at Chardene and Hand Pump	3/31/17	2,188			2,188	15 MO S/L	182	146
269	Solar Panels at MPCA	2/28/17	20,247			20,247	5 MO S/L	5,399	4,050
271	Degeance Land Terrace (continued cost)	6/30/19	49,275			49,275	0 -- Memo	0	0
272	Land at Ebenezer II Church	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	10	31
274	Mission Center Batteries	2/20/18	4,829			4,829	7 MO S/L	230	690
275	Mission Center Tool Storage Shelves	2/20/18	1,056			1,056	5 MO S/L	70	212
277	Dupin Office & Classroom	3/01/18	6,226			6,226	40 MO S/L	52	156
278	EBE II Church Land	11/15/18	11,044			11,044	0 -- Land	0	0
Total Other Depreciation			<u>2,425,442</u>			<u>2,425,442</u>		<u>919,023</u>	<u>64,175</u>
Total ACRS and Other Depreciation			<u>2,425,442</u>			<u>2,425,442</u>		<u>919,023</u>	<u>64,175</u>
Grand Totals			2,425,442			2,425,442		919,023	64,175
Less: Dispositions and Transfers			0			0		0	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>2,425,442</u>			<u>2,425,442</u>		<u>919,023</u>	<u>64,175</u>

Robin Ridge

From: CharitableRegistration@OhioAttorneyGeneral.gov
Sent: Monday, January 27, 2020 7:03 PM
To: Robin Ridge
Subject: Submitted: Charitable registration annual report

Organization: Mission Possible, Inc.
EIN: 34-1290940

Robin Ridge has submitted an annual report for fiscal year end 2019 for Mission Possible, Inc. on 1/27/2020 at 7:03 PM. Please review the information listed below and print for your records. If there are any errors, please contact us.

Not all organizations are required to file a full annual report. If your organization was not required to file a full annual report you will see several blank fields in the filing summary below.

Step 1 Details -

Report Year:	2019
Did you hire a professional solicitor?	No
Did your organization solicit charitable contributions from the general public on its own behalf?	Yes
Gross revenue (does NOT include governmental grants and funding from other 501(c)(3) organizations)	\$1,183,264.00
Total assets:	\$1,441,632.00

Step 2 Details -

Name of Organization: Mission Possible, Inc.
EIN: 34-1290940
Phone: (419)422-3364
Fax:
Web Address: www.ourmissionispossible.org
Secretary of State charter number: 534519
Bingo License Number:

Business location

Country:	United States
Address Line 1:	306 W Bigelow Ave
City:	Findlay
State:	Ohio
Zip:	45840
County:	Hancock

Mailing address

Country:	United States
Address Line 1:	PO Box 1026
City:	Findlay
State:	Ohio
Zip:	45839
County:	Hancock

Step 3 Details -

Individual contributions:	\$911,461.00
All other revenue:	\$271,803.00
Total revenue:	\$1,183,264.00
Program service expenses:	\$1,036,635.00
All other expenses:	\$181,835.00
Total expenses:	\$1,218,470.00
Total assets:	\$1,441,632.00
Total liabilities:	\$165,027.00

Step 4 Details -

Directors and trustees information

First Name:	Herb
Last Name:	Codington
Country:	United States
Address Line 1:	16749 Hwy 56 N
City:	Clinton
State:	South Carolina
Zip:	29325
Title/Position:	Board Member
Average Weekly Hours:	12
Compensation:	\$22,000.00

First Name:	Amanda
Last Name:	Cronkleton
Country:	United States
Address Line 1:	24394 Drake Skidmore Rd
City:	West Mansfield
State:	Ohio
Zip:	43358
Title/Position:	Secretary
Average Weekly Hours:	2

Compensation: \$0.00

First Name: Bruce
Last Name: Feeney
Country: United States
Address Line 1: 4141 TR 47
City: Rawson
State: Ohio
Zip: 45881
Title/Position: Treasurer
Average Weekly Hours: 2
Compensation: \$0.00

First Name: Mark
Last Name: Yoder
Country: United States
Address Line 1: 8180 Rockport Rd
City: Blufon
State: Ohio
Zip: 45817
Title/Position: Chairman of Board
Average Weekly Hours: 2
Compensation: \$0.00

First Name: Patti
Last Name: Spiegel
Country: United States
Address Line 1: 470 N 4th St
City: Upper Sandusky
State: Ohio
Zip: 43351
Title/Position: Board Member
Average Weekly Hours: 1
Compensation: \$0.00

First Name: Guthrie
Last Name: Bunn
Country: United States
Address Line 1: 1313 Neans Dr.
City: Austin
State: Texas
Zip: 78758
Title/Position: Board Member
Average Weekly Hours: 1

Compensation: \$0.00

First Name: Mark
Last Name: Macke
Country: United States
Address Line 1: 5090 Road O
City: Pandora
State: Ohio
Zip: 45877
Title/Position: Board Member
Average Weekly Hours: 1
Compensation: \$0.00

First Name: Trace
Last Name: Roth
Country: United States
Address Line 1: 306 W Bigelow Ave
Address Line 2: PO Box 1026
City: Findlay
State: Ohio
Zip: 45840
County: Hancock
Title/Position: Finance Director
Average Weekly Hours: 40
Compensation: \$46,800.00

First Name: Jim
Last Name: Gillam
Country: United States
Address Line 1: 306 W Bigelow Ave
City: Findlay
State: Ohio
Zip: 45840
County: Hancock
Title/Position: Board Member
Average Weekly Hours: 1
Compensation: \$0.00

First Name: Jenn
Last Name: Buzaleski
Country: United States
Address Line 1: 306 W Bigelow Ave
City: Findlay
State: Ohio

Zip: 45840
County: Hancock
Title/Position: Board Member
Average Weekly Hours: 1
Compensation: \$0.00

First Name: Josh
Last Name: Steiner
Country: United States
Address Line 1: 306 W Bigelow Ave
City: Findlay
State: Ohio
Zip: 45840
County: Hancock
Title/Position: Board Member
Average Weekly Hours: 1
Compensation: \$0.00

First Name: John W.
Last Name: Schwartz Jr.
Country: United States
Address Line 1: 306 W Bigelow Ave
City: Findlay
State: Ohio
Zip: 45840
County: Hancock
Title/Position: Board Member
Average Weekly Hours: 1
Compensation: \$0.00

First Name: David
Last Name: Rath
Country: United States
Address Line 1: 306 W Bigelow Ave
City: Findlay
State: Ohio
Zip: 45840
County: Hancock
Title/Position: President
Average Weekly Hours: 40
Compensation: \$70,000.00

First Name: Jeffrey
Last Name: Eiden

Country:	United States
Address Line 1:	8320 Bixel Rd
City:	Pandora
State:	Ohio
Zip:	45877
County:	Putnam
Title/Position:	Board Member
Average Weekly Hours:	1
Compensation:	\$0.00

Board meetings in last fiscal year: 2
Conflict of interest policy? Yes
Was organization Audited this year? Yes

Step 5 Details -

DBA names

Coventurers and specific terms

Step 6 Details -

- Section 1

Is primary office in Ohio? Yes

Primary business address:

Form of the charitable organization:

- Section 2

Chapters

- Section 3

Financial records custodian

- Section 4

Schedule of activity description:

Charitable Purpose:

When will solicitation be conducted:

Ohio counties where solicitation will be conducted:

- Section 5

Custodian of contributions

Custodian of distributions

Agencies

- Section 6

Organization enjoined?

Organization registration or authority denied / suspended / revoked / enjoined?

Organization had voluntary agreement with government authority?

Organization received cease and desist order?

Explanation

- Section 7

Amount by Ohio residents in the preceding fiscal year including Bingo proceeds:

Amount of distribution to ohio residents for national / out of ohio organizations:

Amount of gross bingo proceeds generated in State of Ohio:

Charitable purpose for previous year contributions used:

Office of Ohio Attorney General Dave Yost

CharitableRegistration@OhioAttorneyGeneral.gov | 800-282-0515

Form **8868**

Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

(Rev. January 2019)

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions. Mission Possible	Employer identification number (EIN) or 34-1290940
	Number, street, and room or suite no. If a P.O. box, see instructions. 306 W. Bigelow	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Findlay OH 45840	

Enter the Return Code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

Trace Roth
306 W. Bigelow

• The books are in the care of ▶ **Findlay** **OH 45840**

Telephone No. ▶ **419-422-3364** Fax No. ▶

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **05/15/20**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year _____ or
- ▶ tax year beginning **07/01/18**, and ending **06/30/19**

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.