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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No 1545-0047

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning , and ending

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
DOTHAN RESCUE MISSION, INC.

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
PO BOX 6691

City, town or post office, state and ZIP code
DOTHAN AL 36302-6691

D Employer identification number
63-0772354

E Telephone number
334-794-4637

G Gross receipts $ 1,283,170

F Name and address of principal officer
BRADLEY HARDY
PO BOX 6691
DOTHAN AL 36302-6691

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website ▶ www.dothanrescuemission.com

H(c) Group exemption number ▶

K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation

M State of legal domicile

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO SPREAD THE GOOD NEWS OF SALVATION THROUGH CHRIST BY SERVING THE NEEDS OF THE POOR, ADDICTED, AND HOMELESS; SO THAT LIVES MAY BE CHANGED THROUGH REDEMPTION, RECOVERY & RE-ENTRY BACK INTO SOCIETY.

2 Check this box ▶ ☐ 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	19
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	19
5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	38
6 Total number of volunteers (estimate if necessary)	6	100
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 34	7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	212,588	163,491
9 Program service revenue (Part VIII, line 2g)	21,552	20,372
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,660	1,232
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	922,851	352,083
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,159,651	537,178
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	20,190	22,134
14 Benefits paid to or for members (Part IX, column (A), line 4)	5,244	3,640
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	524,011	268,317
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 37,078		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	703,069	279,029
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	1,252,514	573,120
19 Revenue less expenses Subtract line 18 from line 12	-92,863	-35,942

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	1,518,359	1,471,571
21 Total liabilities (Part X, line 26)	62,229	51,383
22 Net assets or fund balances Subtract line 21 from line 20	1,456,130	1,420,188

RECEIVED
MAY 20 2013
OGDEN, UT
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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 — Date 5/14/13

BRADLEY HARDY EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
George C. McClintock, CPA	George C. McClintock, CPA	05/07/13		P01391496

Firm's name ▶ MCCLINTOCK, NELSON & ASSOCIATES, P.C. Firm's EIN ▶ 63-1012714

Firm's address ▶ 3646 W MAIN ST DOTHAN, AL 36305-1048 Phone no 334-793-1414

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

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2012)

DAA

SCANNED JUN 17 2013

G17 17

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission

TO SPREAD THE GOOD NEWS OF SALVATION THROUGH CHRIST BY SERVING THE NEEDS OF THE POOR, ADDICTED, AND HOMELESS; SO THAT LIVES MAY BE CHANGED THROUGH REDEMPTION, RECOVERY & RE-ENTRY BACK INTO SOCIETY.

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 $ 31,560 including grants of $) (Revenue $)

WCHP - 60-bed men's facility used to house homeless men; includes an educational space for training homeless clients for them to integrate themselves back into society

4b (Code) (Expenses $ 20,220 including grants of $) (Revenue $)

WOMEN'S SHELTER - 20-bed facility used to house homeless women

4c (Code) (Expenses $ 24,666 including grants of $) (Revenue $)

FAMILY LODGE - facility consisting of 4 apartments used to house homeless families. This lodge provides a means to keep families together during a stressful event.

4d Other program services (Describe in Schedule O)
(Expenses $ 82,687 including grants of $ 22,134) (Revenue $)

4e Total program service expenses ▶ 159,133

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	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	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		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	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
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	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		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	32		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	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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	37		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	38		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	38		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O				
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		

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 to any question in this Part VI ☐

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	1a	19		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	19		
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?		2		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?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		X
6	Did the organization have members or stockholders?		6		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?		7a		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?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	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		9		X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		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?	11a		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	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		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	15a		X
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	15b		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		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 ▶ None

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ DOTHAN RESCUE PO BOX 6691 DOTHAN AL 36302 334-794-4637

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

Check if Schedule O contains a response to any question in this Part VII ☐

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

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

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

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 organizations 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) Bradley Hardy Ex. Director	40.00 0.00	X						57,218	0	16,344
(2) See Attached List	0.00 0.00			X				0	0	0
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										

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)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
1b Sub-total ▶								57,218		16,344
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶								57,218		16,344

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in 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? If "Yes," complete Schedule J for such individual	3		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? If "Yes," complete Schedule J for such individual	4		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? If "Yes," complete Schedule J for such person	5		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

Form 990 (2012) DOTHAN RESCUE MISSION, INC. 63-0772354 Page 9

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question 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, 513, or 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	20,372				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	143,119				
	g Noncash contributions included in lines 1a-1f $						
	h Total. Add lines 1a–1f ▶			163,491			
Program Service Revenue		Busn Code					
	2a Contributions from City-Proje			20,372	20,372		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a–2f ▶			20,372			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			1,232	1,232		
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶						
		(i) Real	(ii) Personal				
	6a Gross rents						
	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				
	b Less cost or other basis & sales exps						
	c Gain or (loss)						
	d Net gain or (loss) ▶						
	8a Gross income from fundraising events (not including $ of contributions reported on line 1c) See Part IV, line 18	a	25,500				
	b Less direct expenses	b	16,478				
	c Net income or (loss) from fundraising events ▶			9,022			9,022
	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	1,025,777				
	b Less cost of goods sold	b	729,514				
	c Net income or (loss) from sales of inventory ▶			296,263			296,263
	Miscellaneous Revenue	Busn Code					
	11a Other income			46,798	46,798		
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a–11d ▶			46,798			
	12 Total revenue. See instructions ▶			537,178	68,402	0	305,285

Form 990 (2012) DOTHAN RESCUE MISSION, INC. 63-0772354 Page 10

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 to any question 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 governments and organizations in the U S See Part IV, line 21				
2 Grants and other assistance to individuals in the U S See Part IV, line 22	22,134	22,134		
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members	3,640	3,640		
5 Compensation of current officers, directors, trustees, and key employees	69,922		69,922	
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	138,825	24,619	114,206	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	36,942	2,911	34,031	
10 Payroll taxes	22,628	1,969	20,659	
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	8,992		8,992	
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	43,557		6,479	37,078
13 Office expenses	13,714	4,208	9,506	
14 Information technology				
15 Royalties				
16 Occupancy	57,578	33,163	24,415	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	2,579		2,579	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	92,695	56,913	35,782	
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 VEHICLE & TRAVEL	14,177		14,177	
b TELEPHONE	12,748	4,101	8,647	
c FOOD PURCHASES	10,473		10,473	
d OTHER INSURANCE	6,173	1,493	4,680	
e All other expenses	16,343	3,982	12,361	
25 Total functional expenses. Add lines 1 through 24e	573,120	159,133	376,909	37,078
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 ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2012) DOTHAN RESCUE MISSION, INC. 63-0772354 Page 11

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest bearing		34,143	1	40,982
	2	Savings and temporary cash investments		119,600	2	92,476
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	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 2,238,824			
	b	Less accumulated depreciation	10b 901,796	1,363,531	10c	1,337,028
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		1,085	15	1,085
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		1,518,359	16	1,471,571
Liabilities	17	Accounts payable and accrued expenses		4,253	17	3,407
	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		57,976	23	47,976
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		62,229	26	51,383
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets			27	
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☒ 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		11,100	31	11,100
	32	Retained earnings, endowment, accumulated income, or other funds		1,445,030	32	1,409,088
	33	Total net assets or fund balances		1,456,130	33	1,420,188
	34	Total liabilities and net assets/fund balances		1,518,359	34	1,471,571

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	537,178
2	Total expenses (must equal Part IX, column (A), line 25)	2	573,120
3	Revenue less expenses Subtract line 2 from line 1	3	-35,942
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,456,130
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,420,188

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☐ Accrual ☒ Other MODIFIED CASH 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 ☐ Consolidated basis ☐ Both consolidated and separate basis	2a	X	
b	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 ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b		X
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c		
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?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

DOTHAN RESCUE MISSION, INC.

Employer identification number

63-0772354

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I b ☐ Type II c ☐ Type III–Functionally integrated d ☐ Type III–Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
11g(i) (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		
11g(ii) (ii) A family member of a person described in (i) above?		
11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above?		

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

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

Schedule A (Form 990 or 990-EZ) 2012 DOTHAN RESCUE MISSION, INC. 63-0772354 Page 2

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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	668,299	192,268	216,472	212,588	163,491	1,453,118
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	668,299	192,268	216,472	212,588	163,491	1,453,118
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)						575,402
6 **Public support.** Subtract line 5 from line 4						877,716

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	668,299	192,268	216,472	212,588	163,491	1,453,118
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	688	9,017	5,377	565	99	15,746
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 IV)	41,594	40,024	34,558	54,058	46,198	216,432
11 **Total support.** Add lines 7 through 10						1,685,296
12 Gross receipts from related activities, etc (see instructions)					12	68,402

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 2012 (line 6, column (f) divided by line 11, column (f))	14	52.08 %
15	Public support percentage from 2011 Schedule A, Part II, line 14	15	53.02 %

16a **33 1/3% support test—2012.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test—2011.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2012.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

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 ▶ ☐

Schedule A (Form 990 or 990-EZ) 2012 DOTHAN RESCUE MISSION, INC. 63-0772354

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2011** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests—2012.** 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—2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information. (See instructions)

Part II, Line 10 - Other Income Detail

MISCELLANEOUS INCOME	$	216,432

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

DOTHAN RESCUE MISSION, INC.

Employer identification number

63-0772354

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an 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

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

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, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part 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" to Form 990, Part IV, line 8

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) Revenues included in 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 Revenues included in 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" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

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

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

		Amount
c	Beginning balance	1c
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

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

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

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

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

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

The percentages in 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

		Yes	No
(i)	unrelated organizations	3a(i)	
(ii)	related organizations	3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

Part VI Land, Buildings, and Equipment. 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		80,641		80,641
b Buildings		1,799,671	597,856	1,201,815
c Leasehold improvements				
d Equipment		358,512	303,940	54,572
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ▶				1,337,028

Schedule D (Form 990) 2012 DOTHAN RESCUE MISSION, INC. 63-0772354

Part VII Investments—Other Securities. 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)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	

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

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

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
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	

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

1	Total expenses and losses per audited financial statements			1	
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	
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	

Part XIII Supplemental Information

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

Part XIII Supplemental Information (continued)

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
DOTHAN RESCUE MISSION, INC.

Employer identification number
63-0772354

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

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

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

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

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

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fund-raiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total		▶					

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

Schedule G (Form 990 or 990-EZ) 2012 DOTHAN RESCUE MISSION, INC. 63-0772354 Page 2

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

		(a) Event #1 DUCK DYNASTY FU (event type)	(b) Event #2 (event type)	(c) Other events None (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	25,500			25,500
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)	25,500			25,500
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	1,300			1,300
	7 Food and beverages				
	8 Entertainment	15,028			15,028
	9 Other direct expenses	150			150
	10 Direct expense summary Add lines 4 through 9 in column (d)			▶	16,478
	11 Net income summary Combine line 3, column (d), and line 10			▶	9,022

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

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

9 Enter the state(s) in which the organization operates gaming activities

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain

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

b If "Yes," explain

11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility 13a %

b An outside facility 13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ and the amount of gaming revenue retained by the third party ▶ $

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also complete this part to provide any additional information (see instructions)

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

DOTHAN RESCUE MISSION, INC.

Employer identification number

63-0772354

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

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

3 Enter total number of other organizations listed in the line 1 table ▶

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Utility bills for needy		22,134			
2					
3					
4					
5					
6					
7					

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047
2012
Open to Public Inspection

Name of the organization
DOTHAN RESCUE MISSION, INC.

Employer identification number
63-0772354

Form 990, Part I, Line 6

THE ORGANIZATION HAS ABOUT 5-10 VOLUNTEERS THAT PROVIDE THEIR SERVICES ON A REGULAR BASIS. THEY ALSO HAVE ABOUT 100-120 VOLUNTEERS A MONTH FROM SUNDAY SCHOOL CLASSES AND OTHER GROUPS THAT MAY COME ONCE A MONTH. THESE MAY OR MAY NOT BE THE SAME VOLUNTEERS EACH MONTH.

Form 990, Part III, Line 4d - All Other Accomplishment

PROJECT CARE - UTILITY BILLS FOR ELDERLY AND UNDERPRIVILEGED

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

No review was or will be conducted.

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

No documents available to the public

Revised 5/7/2013

DOTHAN RESCUE MISSION

Board of Directors

Executive Director

	Employment Date
Bradley D. Hardy	04/26/04
386 Dakota Springs Drive	**Home: 693-0141 Fax: 712-9480**
Headland, AL 36345	**Bus: 794-4637 Mobile: 726-3691**
	Email: hardy2000@hotmail.com

Board of Directors

	Membership Date
President	
Mr. Tom Ziegenfelder	11/15/93
630 Westbrook Rd	**Home: 479-8165 FAX:**
Dothan, AL 36303	**Bus: Mobile: 791-8516**
	Email: ziggy6973@hotmail.com
Vice-President	
Mr. George McClintock, Jr.	11/07/09
1602 Montcliff Dr.	**Home: 792-9575**
Dothan, AL 36303	**Bus: 677-0508 FAX: 836-0097**
	Email: gmmclin301@aol.com
Past-President	
Mr. Dan Johnson	9/14/99
205 Girard Avenue	**Home: 702-8894 FAX: 671-0977**
Dothan, AL 36303	**Bus: 792-5157**
	Email: djohnson@lbfjlaw.com
Secretary	
Sharon McAllister	01/18/89
1201 Earline Road	
Dothan, Alabama 36305	**Home: 792-5221**
Treasurer	
Mr. Neal Stanford	03/29/11
704 Wildwood Avenue	**Home: 685-3975**
Dothan, AL 36303	**Email: nstanford@sunsouth.com**

Revised 5/7/2013

Kristen Baker
206 Orchard Circle
Dothan, AL 36305

03/29/11
Home: 796-4354
Bus: 983-6500 ext. 98270
Email: kristen.baker@covan.com

Mrs. Dana Cobb
1102 Magnolia Ave.
Dothan, AL 36301

06/05/90
Home: 677-0894
Cell: 718-0715
Email: dacobb2003@hotmail.com

Mr. Edwin A Cox
121 Hidden Glen Way
Dothan, AL 36303

02/17/09
Home: 685-1633(cell)
Bus: 699-4036
Email: coxeac@yahoo.com

Mr. Danny Egbert
1006 Overlook Drive
Dothan, AL 36303

2008
Home: 793-1872
Bus: 693-3369
Email: rangerb5@aol.com

Mr. Charles Jenkins
1058 County Road 513
Midland City, AL 36350

08/10/79
Home: 795-3133

Bobbie Marchman
305 Mauldin Drive
Dothan, Alabama 36301

01/24/06
Home: 794-5948
Email: bbmarchman@aol.com

Dr. William McLaughlin
1008 Brookstone Court
Dothan, AL 36303

09/27/88
Home: 793-2288
Bus: 836-3325 (Nurse, Kay) FAX: 836-0097
Email: kmckinney@dothangi.com

Mr. Mason Morrow
110 Mill Ridge Rd
Dothan, AL 36303

11/17/95
Home: 792-0172 Fax: 702-7815
Bus: 678-2285 Mobile: 618-9049
Email: mason.morrow@bankmidsouth.com

Mr. Marty Robbins
711 Lakeview Street
Abbeville, AL 36310

09/14/99
Home: 585-6611 Fax: 671-2802
Bus: 794-8120 Mobile: 726-0057
Email: mdrobbins2@gmail.com
mdrobbins@martyrobbinsroofing.com

Revised 5/7/2013

Rev. O'Neal Robinson — **11/22/93**
2400 Stonebridge Road
Dothan, Alabama 36301
Home: 793-6991
Email: T.O.Robinson@GRACEBA.net

Rev. Ernest Small — **10/25/05**
500 Mayo Street
Dothan, AL 36301
Home: 792-8819
Cell: 701-4609
Email: ernestsmall@juno.com

Ms. Sandra (Sandy) Spengler — **11/17/97**
2104 Hardwick Drive
Dothan, AL 36303
Home: 793-1220
Bus: 556-2212
Email: spengler2104@comcast.net

Mrs. Hope Wyatt — **03/11/91**
1300 Haisten Drive
Dothan, Alabama 36301
Home: 792-8978

BOARD MEMBER EMERITUS

Revised 5/7/2013

Mr. Buddy Holmes 03/02

BOARD MEMBERS DECEASED

Mrs. Louise Crammer	11/08/90
Mr. Charles Dunseth	07/22/87
Mr. James Jacobs	07/03/85
Mr. Don Pitman	06/19/86
Mr. Fred Garner	04/27/93
Mrs. Mary Virginia Garner	05/8/02
Mr. Andrew (Andy) Kosan	09/30/02
Mr. Graham Nibbs	11/03
Mrs. Marian Dunseth	04/18/94
Mr. Allen Waid	04/18/94
Mr. Richmond McClintock	09/16/02
Mr. Wamon Faulk	12/06/93
	March 2012

Retired Members:

Mr. William (Bill) B. Baxter
The Village At Appledorn, Apartment 135
630 Hastings Avenue Home: (616) 392-4699
Holland, MI 49423

Mr. J. D. Holman 02/28/90

LEAVE OF ABSENCE BEGINNING MARCH 2011:

Dr. Stephen (Steve) Chastain 2/15/99
641 Prevatt Road Home: 794-4824
Dothan, AL 36301 Bus: 794-6611 Email: mdslc98@aol.com

Tax Asset Detail 12/01/12 - 12/31/12

Asset	dt	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Group: Buildings & Improvements												
11		Women's Shelter building	10/01/87	20,945	0	0	20,945	0	20,945	0	S/L	20 0
12		Fence for Women's Shelter	12/08/87	450	0	0	450	0	450	0	S/L	6 0
13		Security system - W S	12/08/87	537	0	0	537	0	537	0	S/L	6 0
14		Remodeling-Women's Shelte	12/08/87	10,713	0	0	10,713	0	10,713	0	S/L	6.0
16		Remodeling - Store #1	11/10/87	6,300	0	0	6,300	0	6,300	0	S/L	20.0
17		Remodeling - W.S	1/04/88	1,011	0	0	1,011	0	1,011	0	S/L	6.0
18		Remodeling - W.S	5/30/88	5,627	0	0	5,627	0	5,627	0	S/L	6 0
19		Remodeling - W S.	7/08/88	2,918	0	0	2,918	0	2,918	0	S/L	6.0
20		Roof- Women's Shelter	9/30/88	5,100	0	0	5,100	0	5,100	0	S/L	6.0
21		Building- Store #2	12/15/88	60,000	0	0	46,445	161	46,606	13,394	S/L	31 0
22		Building - Store #2	12/04/89	20,404	0	0	15,136	55	15,191	5,213	S/L	31.0
23		Building & remodeling	5/01/91	90,046	0	0	62,696	242	62,938	27,108	S/L	31.0
24		Store remodeling	1/08/92	9,031	0	0	9,031	0	9,031	0	S/L	6 0
25		Store remodeling	1/31/92	1,980	0	0	1,980	0	1,980	0	S/L	6.0
26		Store remodeling	2/03/92	772	0	0	772	0	772	0	S/L	6.0
27		Store remodeling	2/07/92	11,372	0	0	11,372	0	11,372	0	S/L	6 0
28		Store remodeling	3/06/92	308	0	0	308	0	308	0	S/L	6 0
29		Store remodeling	4/17/92	4,742	0	0	4,742	0	4,742	0	S/L	6.0
30		Roof repair	5/04/92	689	0	0	689	0	689	0	S/L	6.0
31		Store remodeling	5/04/92	2,752	0	0	2,752	0	2,752	0	S/L	6.0
32		Re-roof office	4/27/93	1,430	0	0	1,430	0	1,430	0	S/L	6.0
35		Rack/table repair	12/12/94	395	0	0	395	0	395	0	S/L	5.0
36		Chapel building	11/01/97	249,097	0	0	93,929	519	94,448	154,649	S/L	40.0
38		New floor	11/17/99	23,900	0	0	20,713	133	20,846	3,054	S/L	15.0
39		Paved parking lot	6/21/99	1,123	0	0	1,004	7	1,011	112	S/L	15 0
135		Men's lodge building	5/30/02	276,863	0	0	74,836	591	75,427	201,436	S/L	39 0
136		Office building	5/30/02	158,943	0	0	42,962	340	43,302	115,641	S/L	39.0
137		Women's Shelter building	5/30/02	198,863	0	0	53,752	425	54,177	144,686	S/L	39.0
		Buildings & Improvements		1,166,311	0c	0	498,545	2,473	501,018	665,293		
Group: Buildings - WCHP												
188		Northstar Engineering	1/10/11	2,538	0	0	122	5	127	2,411	S/L	39.0
189		Ramsey, Baxley	1/10/11	1,606	0	0	77	4	81	1,525	S/L	39.0
190		Engineered Systems	1/10/11	262,189	0	0	12,605	560	13,165	249,024	S/L	39.0
191		Engineered Systems	1/10/11	224,811	0	0	10,808	481	11,289	213,522	S/L	39 0
192		Ramsey, Baxley	1/10/11	30,563	0	0	1,469	66	1,535	29,028	S/L	39 0
		Buildings - WCHP		521,707	0c	0	25,081	1,116	26,197	495,510		
Group: Equipment												
115		Security system - chapel	11/11/97	715	0	0	715	0	715	0	S/L	7 0
116		Walk-in freezer - chapel	11/11/97	4,796	0	0	4,796	0	4,796	0	S/L	7 0
117		Telephone system	12/02/97	500	0	0	500	0	500	0	S/L	5 0
123		Surveillance equipment	6/19/02	2,495	0	748	2,495	0	2,495	0	200DB	7.0
124		surveillance equipment	7/12/02	210	0	63	210	0	210	0	200DB	7 0
126		surveillance equipment	7/23/02	124	0	37	124	0	124	0	200DB	7 0

Tax Asset Detail 12/01/12 - 12/31/12

Asset	dt	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Group: Equipment (continued)												
127		Pressure washer	8/13/02	300	0	90	300	0	300	0	200DB	7.0
128		Surveillance equipment	8/13/02	700	0	210	700	0	700	0	200DB	7 0
129		Telephone system	8/30/02	1,000	0	300	1,000	0	1,000	0	200DB	5.0
130		Cable system for internet service	9/05/02	635	0	191	635	0	635	0	200DB	5.0
131		Telephone system-office	9/05/02	4,090	0	1,227	4,090	0	4,090	0	200DB	5 0
134		Handtruck	12/19/02	453	0	136	453	0	453	0	200DB	7 0
148		2 Cash Registers	12/19/05	1,100	0	0	1,100	0	1,100	0	200DB	7 0
181		New Stove	11/26/08	3,669	0	1,835	3,246	14	3,260	409	200DB	7 0
182		Dishwasher	11/04/09	2,150	0	1,075	1,760	12	1,772	378	200DB	7 0
206		Bob Woodall A/C Systems	2/07/12	41,750	0c	20,875	19,926	1,993	21,919	19,831	150DB	15 0
207		Security System	3/19/12	7,000	0c	3,500	3,308	367	3,675	3,325	150DB	15 0
209		New Compressor	5/09/12	4,725	0c	2,363	2,363	337	2,700	2,025	200DB	7 0
		Equipment		76,412	0c	32,650	47,721	2,723	50,444	25,968		
Group: F & F - Store 3												
197		Racks & Shelves	5/04/11	6,580	0	6,580	6,580	0	6,580	0	200DB	7 0
198		Racks & Shelves	5/05/11	4,225	0	4,225	4,225	0	4,225	0	200DB	7 0
199		Security System	6/08/11	4,824	0	4,824	4,824	0	4,824	0	200DB	7.0
201		Sign	6/08/11	2,750	0	2,750	2,750	0	2,750	0	200DB	7.0
203		Gondola units & racks	6/13/11	8,088	0	8,088	8,088	0	8,088	0	200DB	7.0
		F & F - Store 3		26,467	0c	26,467	26,467	0	26,467	0		
Group: Furniture & Fixtures												
33		Pot rack - kitchen	5/04/93	450	0	0	450	0	450	0	S/L	5 0
34		Refrigerator - W S.	7/16/93	474	0	0	474	0	474	0	S/L	5 0
37		Computer printer	1/31/94	240	0	0	240	0	240	0	S/L	5.0
59				0	0	0	0	0	0	0		0 0
60		Adding machine	5/20/80	53	0	0	53	0	53	0	S/L	3.0
61		2 file cabinets	12/12/80	95	0	0	95	0	95	0	S/L	3 0
62		Kitchen stove	6/26/81	1,272	0	0	1,272	0	1,272	0	S/L	5.0
63		Copier	2/01/84	1,797	0	0	1,797	0	1,797	0	S/L	5 0
64		Fans	4/01/84	315	0	0	315	0	315	0	S/L	5.0
65		Fans	5/01/84	500	0	0	500	0	500	0	S/L	5 0
66		Drapes	2/01/85	300	0	0	300	0	300	0	S/L	5 0
67		Cash register	9/01/85	317	0	0	317	0	317	0	S/L	5 0
68		Vacuum cleaner	10/01/85	150	0	0	150	0	150	0	S/L	5.0
69		Filter Queen	1/03/86	150	0	0	150	0	150	0	S/L	5 0
70		Crine copier	1/09/86	422	0	0	422	0	422	0	S/L	5 0
71		Cooler	2/18/86	500	0	0	500	0	500	0	S/L	5 0
72		Cooler	4/09/86	1,000	0	0	1,000	0	1,000	0	S/L	5 0
73		Cooler	5/06/86	1,000	0	0	1,000	0	1,000	0	S/L	5.0
74		Walk-in refrigerator	6/04/86	800	0	0	800	0	800	0	S/L	5 0
75		Security system	9/11/86	700	0	0	700	0	700	0	S/L	5 0
76		Cash register	9/14/87	227	0	0	227	0	227	0	S/L	5 0
77		Computer	3/18/88	2,033	0	0	2,033	0	2,033	0	S/L	7 0
78		Cash Register	7/31/90	1,257	0	0	1,257	0	1,257	0	S/L	5 0

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Group: Furniture & Fixtures (continued)												
79		Typewriter	8/01/83	47	0	0	47	0	47	0	S/L	5.0
80		Typewriter	2/07/92	399	0	0	399	0	399	0	S/L	5.0
81		Refrigerator - M S	3/09/92	2,300	0	0	2,300	0	2,300	0	S/L	5 0
82		Blinds - store	9/30/92	523	0	0	523	0	523	0	S/L	5 0
83		Commercial freezer - M.S	3/08/93	3,493	0	0	3,493	0	3,493	0	S/L	5 0
84		Work table	4/06/93	189	0	0	189	0	189	0	S/L	5.0
85		Fax machine	2/04/94	375	0	0	375	0	375	0	S/L	5.0
86		Computer monitor	11/21/94	325	0	0	325	0	325	0	S/L	5.0
87		Weed eater	8/15/95	124	0	0	124	0	124	0	S/L	7 0
88		Air conditioner	8/03/95	710	0	0	710	0	710	0	S/L	7.0
89		Safe	8/29/95	198	0	0	198	0	198	0	S/L	10 0
90		TV-VCR	1/10/95	339	0	0	339	0	339	0	S/L	5 0
91		Vacuum cleaner	4/01/95	160	0	0	160	0	160	0	S/L	5 0
92		Time clock	6/01/95	163	0	0	163	0	163	0	S/L	5 0
93		Air conditioner	10/01/96	1,582	0	0	1,582	0	1,582	0	200DB	5 0
94		Printer	1/21/97	550	0	0	550	0	550	0	S/L	5 0
95		Air conditioner	8/12/97	2,000	0	0	2,000	0	2,000	0	S/L	7 0
96		Computer program	1/19/99	1,285	0	0	1,285	0	1,285	0	S/L	5.0
97		Copier	3/04/99	1,216	0	0	1,216	0	1,216	0	S/L	7 0
98		Chairs - chapel	5/10/99	1,160	0	0	1,160	0	1,160	0	S/L	7.0
99		Table - chapel	6/21/99	380	0	0	380	0	380	0	S/L	7 0
100		Paper folding machine	2/07/00	501	0	0	501	0	501	0	S/L	7 0
101		(3) secretary desks	11/06/01	1,978	0	0	1,978	0	1,978	0	S/L	7 0
102		Executive desk	11/06/01	977	0	0	977	0	977	0	S/L	7 0
103		Conference table	11/06/01	449	0	0	449	0	449	0	S/L	7 0
104		(4) side chairs	11/06/01	607	0	0	607	0	607	0	S/L	7.0
105		(8) armchairs	11/06/01	875	0	0	875	0	875	0	S/L	7.0
106		Bookcase	12/03/01	248	0	0	248	0	248	0	S/L	7.0
107		(10) chairs	12/03/01	1,290	0	0	1,290	0	1,290	0	S/L	7.0
108		(4) desk chairs	12/03/01	516	0	0	516	0	516	0	S/L	7.0
109		Refrigerator-office	12/11/01	140	0	0	140	0	140	0	S/L	5.0
110		Refrigerator-Men's lodge	12/11/01	140	0	0	140	0	140	0	S/L	5 0
111		Microwave-Office	12/11/01	70	0	0	70	0	70	0	S/L	5 0
112		Microwave-Women's shelter	12/11/01	70	0	0	70	0	70	0	S/L	5 0
113		air conditioner	5/04/01	4,000	0	0	4,000	0	4,000	0	S/L	5.0
114		Vacuum cleaners (2)	7/11/01	649	0	0	649	0	649	0	S/L	5 0
120		Office computer	3/01/02	891	0	267	891	0	891	0	200DB	5 0
121		Ice Machine-Chapel	5/01/02	1,250	0	375	1,250	0	1,250	0	200DB	7 0
122		(3) Calculators	5/29/02	255	0	77	255	0	255	0	200DB	5 0
125		display case	7/23/02	200	0	60	200	0	200	0	200DB	7 0
132		Washer and dryer-women's shelter	11/20/02	498	0	149	498	0	498	0	200DB	7 0
133		(2) TV's and VCR for surveillance	12/18/02	569	0	171	569	0	569	0	200DB	5.0
138		VCR (difference in one returned)	2/25/03	35	0	11	35	0	35	0	200DB	5 0
139		Telephone headsets	2/25/03	247	0	74	247	0	247	0	200DB	5 0
140		Shredder	3/10/03	224	0	67	224	0	224	0	200DB	7 0
141		Store eqmt - racks	3/21/03	4,013	0	1,204	4,013	0	4,013	0	200DB	7.0
142		Office Equipment	1/30/04	755	0	378	755	0	755	0	200DB	5.0
143		Office Equipment	4/01/04	967	0	483	967	0	967	0	200DB	5 0
144		Air Conditioner	7/02/04	7,700	0	3,850	7,700	0	7,700	0	200DB	7 0

Asset	dt	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Group: Furniture & Fixtures (continued)												
145		Bob Woodall - A/C Unit	6/22/05	1,100	0	0	1,100	0	1,100	0	200DB	7.0
149		Casual Corner	1/05/06	550	0	0	540	4	544	6	200DB	7.0
150		M. Fried Store Fixtures	10/05/06	10,094	0	0	9,249	73	9,322	772	200DB	7 0
151		Wiregrass Systems	10/05/06	3,299	0	0	3,023	24	3,047	252	200DB	7 0
156		H & S Telecommunications	11/16/06	3,006	0	0	2,754	22	2,776	230	200DB	7 0
157		Signs Etc.	11/16/06	5,540	0	0	5,076	41	5,117	423	200DB	7 0
158		Wiregrass Systems	11/16/06	3,615	0	0	3,312	27	3,339	276	200DB	7.0
159		Platinum Plus	11/22/06	2,240	0	0	2,053	16	2,069	171	200DB	7.0
160		Signs Etc.	11/30/06	397	0	0	364	3	367	30	200DB	7 0
167		Platinum Plus - FFE	12/14/06	2,240	0	0	2,053	16	2,069	171	200DB	7 0
170		Rand	1/25/07	2,616	0	0	2,246	20	2,266	350	200DB	7.0
174		Blocker H & C	8/09/07	600	0	0	515	5	520	80	200DB	7.0
175		Blocker H & C	8/30/07	600	0	0	515	5	520	80	200DB	7 0
177		Computer	1/30/08	977	0	489	945	4	949	28	200DB	5 0
178		Sams Small Engines	3/24/08	2,999	0	1,500	2,653	11	2,664	335	200DB	7 0
180		Washer & Dryers (6)	6/19/08	4,050	0	2,025	3,583	15	3,598	452	200DB	7.0
183		Gondola & Shelves (Store #2)	5/13/10	5,182	0	2,591	4,011	38	4,049	1,133	200DB	7 0
184		4-way racks & rails - Store #2	5/13/10	4,294	0	2,147	3,323	32	3,355	939	200DB	7.0
185		TSI - reversible slatwell shelf (Store	5/13/10	387	0	194	300	2	302	85	200DB	7.0
193		Camera System	11/16/10	2,662	0	2,662	2,662	0	2,662	0	200DB	7.0
194		Camera System - Store #2	11/16/10	2,662	0	2,662	2,662	0	2,662	0	200DB	7 0
202		Washer & Dryer	6/13/11	1,107	0	1,107	1,107	0	1,107	0	200DB	7 0
208		Lawn Mower	5/22/12	4,589	0c	2,295	2,295	327	2,622	1,967	200DB	7 0
210		Computer	9/12/12	840	0c	420	378	126	504	336	200DB	5.0
		Furniture & Fixtures		127,330	0c	25,258	118,403	811	119,214	8,116		
Group: Furniture & Fixtures-WCHP												
186		Beds for H/P	1/10/11	30,990	0	30,990	30,990	0	30,990	0	200DB	7 0
187		Beds for H/P (1/2)	10/22/10	30,990	0	8,854	14,652	527	15,179	15,811	200DB	7.0
195		Tables & Chairs	1/10/11	1,709	0	1,709	1,709	0	1,709	0	200DB	7 0
196		Greg Wilson - constructing beds	11/08/10	3,000	0	857	1,418	51	1,469	1,531	200DB	7 0
200		Sign	6/08/11	2,750	0	2,750	2,750	0	2,750	0	200DB	7 0
204		Industrial Freezer	1/11/12	4,089	0c	2,045	2,142	195	2,337	1,752	200DB	7.0
205		Industrial Refrigerator	1/11/12	3,199	0c	1,600	1,676	152	1,828	1,371	200DB	7 0
		Furniture & Fixtures-WCHP		76,727	0c	48,805	55,337	925	56,262	20,465		
Group: Land												
1		Land - men's shelter	1/01/79	1,000	0	0	0	0	0	1,000	Memo	50 0
2		Land - office	1/01/85	4,000	0	0	0	0	0	4,000	Memo	50 0
3		Land	12/15/88	15,000	0	0	0	0	0	15,000	Memo	50 0
4		Land - store	4/30/91	15,000	0	0	0	0	0	15,000	Memo	50 0
5		Land - store	7/01/91	15,000	0	0	0	0	0	15,000	Memo	50.0
6		Land - 275 S St Andrews	2/16/96	7,500	0	0	0	0	0	7,500	Memo	50 0
7		Land - Appletree St	4/09/96	2,586	0	0	0	0	0	2,586	Memo	50 0
8		257-B S. St. Andrews	7/31/00	3,500	0	0	0	0	0	3,500	Memo	50 0
9		104 S Appletree St	7/31/00	6,000	0	0	0	0	0	6,000	Memo	50 0

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Group: Land (continued)												
10		Land for Women's Shelter	10/01/87	11,055	0	0	0	0	0	11,055	Memo	50 0
		Land		80,641	0c	0	0	0	0	80,641		
Group: Leasehold Imp. - Store												
152		Bill Harris (sheetrock)	10/13/06	2,472	0	0	388	5	393	2,079	S/L	39.0
153		Roger Cobb Painting	10/19/06	6,240	0	0	980	13	993	5,247	S/L	39 0
154		Flooring Central	10/19/06	7,696	0	0	1,209	16	1,225	6,471	S/L	39 0
155		Allied Acoustics (ceiling)	10/25/06	3,100	0	0	487	7	494	2,606	S/L	39.0
161		Roger Cobb Painting	11/02/06	1,800	0	0	279	4	283	1,517	S/L	39.0
162		SE Construction	11/02/06	750	0	0	116	2	118	632	S/L	39 0
163		Circle City Glass	11/02/06	530	0	0	82	1	83	447	S/L	39 0
164		Mark Merrits H & C	11/02/06	470	0	0	73	1	74	396	S/L	39 0
165		Flooring Central	11/16/06	712	0	0	110	2	112	600	S/L	39.0
166		B & K Construction	11/30/06	8,323	0	0	1,289	18	1,307	7,016	S/L	39 0
168		H & S Telecommunications	12/07/06	470	0	0	189	3	192	278	S/L	15.0
171		Signs Etc	2/22/07	9,800	0	0	3,539	54	3,593	6,207	S/L	15 0
172		Smith's Inc.	6/06/07	5,933	0	0	2,142	33	2,175	3,758	S/L	15 0
173		Smiths Inc	7/25/07	5,933	0	0	2,142	33	2,175	3,758	S/L	15 0
		Leasehold Imp. - Store		54,229	0c	0	13,025	192	13,217	41,012		
Group: Leasehold Improvements												
40		Leasehold improvements	3/01/84	10,649	0	0	10,649	0	10,649	0	S/L	6.0
41		Couch Concrete	2/16/87	580	0	0	580	0	580	0	S/L	6 0
42		West Building	2/20/87	222	0	0	222	0	222	0	S/L	6 0
43		Brewton Material	3/10/87	775	0	0	775	0	775	0	S/L	6 0
44		Cherokee Construction	11/02/89	10,000	0	0	10,000	0	10,000	0	S/L	6 0
45		Conerstone Remodeling	3/31/90	425	0	0	425	0	425	0	S/L	6 0
46		Conerstone Remodeling	3/29/90	3,000	0	0	3,000	0	3,000	0	S/L	6 0
47		Conerstone Remodeling	4/17/90	1,659	0	0	1,659	0	1,659	0	S/L	6 0
48		Conerstone Remodeling	5/11/90	960	0	0	960	0	960	0	S/L	6.0
49		Carpet - store	11/01/91	3,348	0	0	3,348	0	3,348	0	S/L	6 0
50		Air conditioner - store	11/01/91	5,608	0	0	5,608	0	5,608	0	S/L	6.0
51		Carpet - office	8/31/91	1,084	0	0	1,084	0	1,084	0	S/L	6 0
52		Exhaust fans - store	1/14/92	126	0	0	126	0	126	0	S/L	6.0
53		Carpet/vinyl flooring	1/22/92	2,635	0	0	2,635	0	2,635	0	S/L	6 0
54		Roll-up door & locks	2/03/92	493	0	0	493	0	493	0	S/L	6 0
55		Floor covering	3/06/92	128	0	0	128	0	128	0	S/L	6.0
56		Sign	1/31/92	106	0	0	106	0	106	0	S/L	5 0
57		New roof - store	1/03/95	13,750	0	0	13,750	0	13,750	0	S/L	10 0
58		Miscellaneous	11/30/82	1,876	0	0	1,876	0	1,876	0	S/L	5.0
		Leasehold Improvements		57,424	0c	0	57,424	0	57,424	0		

Tax Asset Detail 12/01/12 - 12/31/12

Asset	dt	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Tax Period
Group: Transportation Equipment												
118		1990 Dodge Van	5/11/90	14,791	0	0	14,791	0	14,791	0	S/L	5 0
146		New Truck	3/18/05	17,900	0	0	17,900	0	17,900	0	200DB	5 0
147		2000 Chevy Van (donated)	12/30/05	10,000	0	0	10,000	0	10,000	0	200DB	5 0
169		Van (donated)	9/15/06	6,500	0	0	6,500	0	6,500	0	200DB	5 0
176		92 Oldsmobile (donated)	12/31/07	1,600	0	0	1,600	0	1,600	0	200DB	5 0
179		Trailer	5/08/08	785	0	393	759	3	762	23	200DB	5 0
		Transportation Equipment		51,576	0c	393	51,550	3	51,553	23		
		Grand Total		2,238,824	0c	133,573	893,553	8,243	901,796	1,337,028		